2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010269

Entity Name: KAMP KHALIL, INC.

FILED Jan 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2820 N JULIET DR DELTONA, FL 32738 **Current Mailing Address: New Mailing Address:** PO BOX 391101 DELTONA, FL 32739 FEI Number: 20-8089835 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KHALIL, BAIYINA 2820 N JULIET DR DELTONA, FL 32738 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** (X) Change () Addition () Delete KHALIL, HANIF M Name: KHALIL, HANIF M Name: 2820 N JULIET DR Address: 2820 N JULIET DR Address: City-St-Zip: DELTONA, FL 32738 City-St-Zip: DELTONA, FL 32738 US Title: Title: ED (X) Change () Addition () Delete KHALIL, BAIYINA H Name: KHALIL, BAIYINA H Name: Address: 2820 N JULIET DR Address: 2820 N JULIET DR City-St-Zip: DELTONA, FL 32738 City-St-Zip: DELTONA, FL 32738 US Title: () Delete Title: () Change (X) Addition SERAAJ, NADIYAH Name: Name: 9462 ALYSBURY PLACE Address: Address: City-St-Zip: City-St-Zip: MONTGOMERY, AL 36117 US Title: () Delete Title: **TRUS** () Change (X) Addition SHABAZZ, D. HAMIMA Name: Name: 110 S POWELL ST Address: Address: City-St-Zip: City-St-Zip: UNION SPRINGS, AL 36089 US Title: () Delete Title: () Change (X) Addition HATCH- ABDULLAH, DELLA K Name: Name: 2121 BARCELONA WAY S Address: Address: City-St-Zip: City-St-Zip: ST. PETERSBURG, FL 33712 Title: () Delete Title: () Change (X) Addition FURQAN, ZAKEE Name: Name: Address: Address: 313 ARLINGTON RD N JACKSONVILLE, FL 32211 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BHKALIL ED 01/17/2007