

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002006

FILED  
Apr 08, 2010  
Secretary of State

Entity Name: BARE CAMPERS INC

**Current Principal Place of Business:**

13420 PARK LANE  
HUDSON, FL 34669

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 579  
TRILBY, FL 33593

**New Mailing Address:**

FEI Number: 20-8339614

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

TERVORT, SHIRLEY  
6378 COLONEL AVE  
RIDGE MANOR, FL 33523 US

**Name and Address of New Registered Agent:**

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:**

Title: V  
Name: TERVORT, JAMES R  
Address: PO BOX 579  
City-St-Zip: TRILBY, FL 33593

Title: P  
Name: FAZZAN, ALAN  
Address: 13420 PARK LANE  
City-St-Zip: HUDSON, FL 34664

Title: S  
Name: TERVORT, SHIRLEY F  
Address: PO BOX 579  
City-St-Zip: TRILBY, FL 33593

Title: T  
Name: FAZZAN, KATHY  
Address: 13420 PARK LANE  
City-St-Zip: HUDSON, FL 34664

I hereby 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 all other like empowered.

SIGNATURE: JAMES R TERVORT

V

04/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date