

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007214

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** CAMP MACK'S RIVER RESORT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

14900 CAMPE MACK ROAD  
LAKE WALES, FL 33898

**New Principal Place of Business:**

14900 CAMP MACK ROAD  
LAKE WALES, FL 33898

**Current Mailing Address:**

14900 CAMPE MACK ROAD  
LAKE WALES, FL 33898

**New Mailing Address:**

14900 CAMP MACK ROAD  
LAKE WALES, FL 33898

**FEI Number:** 26-3028988

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EDDY, ROBERT E  
14900 CAMPE MACK ROAD  
LAKE WALES, FL 33898 US

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

EDDY, ROBERT E  
14900 CAMP MACK ROAD  
LAKE WALES, FL 33898 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: ROBERT E. EDDY

04/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SVD ( ) Delete  
Name: EDDY, ROBERT E  
Address: 14900 CAMPE MACK ROAD  
City-St-Zip: LAKE WALES, FL 33898

Title: D ( ) Delete  
Name: FARRIS, DEBBIE  
Address: 14900 CAMPE MACK ROAD  
City-St-Zip: LAKE WALES, FL 33898

Title: PTD ( ) Delete  
Name: FARRIS, BILLY W  
Address: 14900 CAMPE MACK ROAD  
City-St-Zip: LAKE WALES, FL 33898

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SVD (X) Change ( ) Addition  
Name: EDDY, ROBERT E  
Address: 14900 CAMP MACK ROAD  
City-St-Zip: LAKE WALES, FL 33898

Title: D (X) Change ( ) Addition  
Name: FARRIS, DEBBIE  
Address: 14900 CAMP MACK ROAD  
City-St-Zip: LAKE WALES, FL 33898

Title: PTD (X) Change ( ) Addition  
Name: FARRIS, BILLY W  
Address: 14900 CAMP MACK ROAD  
City-St-Zip: LAKE WALES, FL 33898

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT E. EDDY

SVD

04/30/2009

Electronic Signature of Signing Officer or Director

Date