

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17832

FILED  
Jan 10, 2012  
Secretary of State

**Entity Name:** CAMP SONSHINE, INC.

**Current Principal Place of Business:**

2355 ARMADILLO CT.  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

2355 ARMADILLO CT.  
COCOA, FL 32926

**New Mailing Address:**

**FEI Number:** 59-1447539

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAGGART, MICHAEL A  
2355 ARMADILLO CT  
COCOA, FL 32926 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: D  
Name: MILLER, DARRELL E  
Address: 4800 CATHEDRAL WAY  
City-St-Zip: TITUSVILLE, FL 32780 US

Title: O  
Name: CRITTENDEN, JEREMY  
Address: 6129 SW C.R. 239  
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: T  
Name: TAGGART, MICHAEL A  
Address: 2355 ARMADILLO RD  
City-St-Zip: COCOA, FL 32926 US

Title: O  
Name: FERNANDEZ, ANDRES D  
Address: 3496 LYNWOOD DR APT 9  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: S  
Name: SHROVE, KRISTINE M  
Address: 9401 NW 18 ST  
City-St-Zip: PEMBROKE PINES, FL 33024 US

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: MICHAEL A TAGGART

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01/10/2012

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

\_\_\_\_\_  
Date