

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22946

FILED
Apr 29, 2005
Secretary of State

Entity Name: PRESBYTERIAN CAMP AND CONFERENCE MINISTRIES OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

1920 STREETMAN DRIVE
LITHIA, FL 33547 US

New Principal Place of Business:

Current Mailing Address:

1920 STREETMAN DR.
LITHIA, FL 33547 US

New Mailing Address:

FEI Number: 59-2861786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBRA J.K. BRONKEMA & JOHN H. BRONKEMA
1916 STREETMAN DRIVE
LITHIA, FL 33547 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 () Delete
Name: BRONKEMA, DEBRA J. K.
Address: 1916 STREETMAN DRIVE
City-St-Zip: LITHIA, FL 33547

Title: D () Delete
Name: BRONKEMA, JOHN H
Address: 1916 STREETMAN DRIVE
City-St-Zip: LITHIA, FL 33547

Title: P () Delete
Name: CHILDS, CARRIE
Address: 12107 WOOD DUCK PLACE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: V () Delete
Name: ALTAMORE, RODNEY
Address: 2519 JAMAICA STREET
City-St-Zip: SARASOTA, FL 34231

Title: T () Delete
Name: BULNES, JOSETTE
Address: 3006 PEACOCK LANE
City-St-Zip: TAMPA, FL 33618

Title: S () Delete
Name: BOURQUE, PATTI
Address: 6946 ROSLYN COURT
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CHILDS, CARRIE
Address: 10907 VICTORIA ARBOR WAY
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: P (X) Change () Addition
Name: ALTAMORE, RODNEY
Address: 2519 JAMAICA STREET
City-St-Zip: SARASOTA, FL 34231

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEBRA J. K. BRONKEMA

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date