

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22946

**FILED**  
**Jan 06, 2010**  
**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 DRIVE  
LITHIA, FL 33547 US

**New Mailing Address:**

**FEI Number:** 59-2861786

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

REITER, JOHN  
2035 HEARTLAND CIRCLE  
VALRICO, FL 33594 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: REITER, JOHN  
Address: 2035 HEARTLAND CIRCLE  
City-St-Zip: LITHIA, FL 33594

Title: P  
Name: CHILDS, CARRIE  
Address: 10907 VICTORIA ARBOR WAY  
City-St-Zip: TAMPA, FL 33617

Title: VP  
Name: CANNING, GINNY  
Address: 8725 FORDHAM ST  
City-St-Zip: FORT MYERS, FL 33907

Title: T  
Name: BROWN, DOUG  
Address: 433 PARK BLVD  
City-St-Zip: VENICE, FL 34285

Title: S  
Name: MANSPERGER, MIKE  
Address: 7950 S TAMiami TRAIL  
City-St-Zip: SARASOTA, FL 34231

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: JOHN REITER

REV

01/06/2010

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

\_\_\_\_\_  
Date