2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2007
Secretary of State

DOCUMENT# N33352

Entity Name: REGULAR BAPTIST CAMP OF FLORIDA, INC.

Current Principal Place of Business:

5055 CAMP SPARTA RD
SEBRING, FL 33875

New Principal Place of Business:

Current Mailing Address:

5055 CAMP SPARTA RD
SEBRING, FL 33875

New Mailing Address:

FEI Number: 59-2952626 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SNYDER, AARON
5050 CAMP SPARTA RD
SEBRING, FL 33875 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: TD ( ) Delete
Name: SORBER, PAUL
Address: 4906 MEALUECA LN
City-St-Zip: LAKE WORTH, FL 33463

Title: D ( ) Delete
Name: CONRAD, DAVID
Address: 778 C17AS BOX 1999
City-St-Zip: AVON PARK, FL 33826

Title: M ( ) Delete
Name: SNYDER, AARON
Address: 5050 CAMP SPARTA RD
City-St-Zip: SEBRING, FL 33875

Title: SD ( ) Delete
Name: COMINGS, DANIE
Address: 4625 CLEVELAND HEIGHTS BLVD.
City-St-Zip: LAKELAND, FL 33813

Title: PD ( ) Delete
Name: PAUSLEY, CHUCK
Address: 379 S.COMMERCE ST
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: AARON SNYDER M 07/26/2007
Electronic Signature of Signing Officer or Director — Date