

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003741

Entity Name: CAMP WINGMANN, INC.

FILED
Feb 01, 2007
Secretary of State

Current Principal Place of Business:

3401 N CAMP WINGMAN RD
AVON PARK, FL 33825 US

New Principal Place of Business:

Current Mailing Address:

3401 N CAMP WINGMAN RD
AVON PARK, FL 33825 US

New Mailing Address:

FEI Number: 65-0846704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YATES, DAVIS V
1826 STONECREST COURT
LAKE LAND, FL 33813 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: YATES, DAVIS V
Address: 1826 STONECREST COURT
City-St-Zip: LAKE LAND, FL 33813

Title: SD () Delete
Name: WHITE, JOHN C
Address: 753 JOHNSON AVENUE SOUTH
City-St-Zip: LAKE LAND, FL 33801

Title: MD () Delete
Name: YATES, WILLIAM J
Address: 3301 N CAMP WINGMANN RD
City-St-Zip: AVON PARK, FL 33825

Title: PD () Delete
Name: HOUDYSHELL, VANCE
Address: P.O. BOX 4200
City-St-Zip: VERO BEACH, FL 32964

Title: TD () Delete
Name: BARTLE, PHYLLIS
Address: 733 CREEKWATER TERRACE, APT. 201
City-St-Zip: LAKE MARY, FL 32746

Title: VPD () Delete
Name: BOURNE, ANNA
Address: 2102 LADNER ROAD NE
City-St-Zip: PALM BAY, FL 32907

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: VPD (X) Change () Addition
Name: ATKINSON, THOMAS
Address: 3450 OCEAN BEACH BLVD #804
City-St-Zip: COCOA BEACH, FL 32831

Title: TD (X) Change () Addition
Name: BARTLE, PHYLLIS
Address: 330 HICKORY AVENUE
City-St-Zip: ORANGE CITY, FL 32763

Title: PD (X) Change () Addition
Name: BOURNE, ANNA
Address: 2102 LADNER ROAD NE
City-St-Zip: PALM BAY, FL 32907

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM J. YATES

MD

02/01/2007

Electronic Signature of Signing Officer or Director

Date