

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007539

FILED
May 05, 2008
Secretary of State

Entity Name: ITHIEL CAMP AND RETREAT CENTER INC.

Current Principal Place of Business:

2073 HEMPEL AVENUE
GOTHA, FL 34734

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 25
GOTHA, FL 34734

New Mailing Address:

FEI Number: 58-2525404 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:

NEFF, MICHAEL T
2037 HEMPEL AVENUE
GOTHA, FL 34734 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: POLSON, JOHN
Address: 268 BAYWEST NEIGHBORS CIR.
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: GARMAN, MATTHEW
Address: 9767 CARBONDALE DR. E.
City-St-Zip: JACKSONVILLE, FL 32208

Title: CD () Delete
Name: HOLLENBERG, DEAN
Address: 4275 CREMORA DRIVE
City-St-Zip: SEBRING, FL 33872

Title: D () Delete
Name: YOUNG, ALAN
Address: 4513 WETHERBEE RD
City-St-Zip: ORLANDO, FL 32824

Title: VCD () Delete
Name: MERLE, CROUSE
Address: 806 W. NEW NOLTE RD.
City-St-Zip: ST CLOUD, FL 34769

Title: D () Delete
Name: KETIA, POLICAPE
Address: 548 TOWNE SQUARE WAY #714
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CD (X) Change () Addition
Name: GARMAN, MATTHEW
Address: 9767 CARBONDALE DR. E.
City-St-Zip: JACKSONVILLE, FL 32208

Title: D (X) Change () Addition
Name: ZIEGLER, DAWN
Address: 3909 DUFFER RD
City-St-Zip: SEBRING, FL 33872

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

Title: D (X) Change () Addition
Name: JESSICA, CADETTE
Address: 7001 ENVIRON BLVD #107
City-St-Zip: LAUDERHILL, FL 33319

Title: VCD (X) Change () Addition
Name: KETIA, POLICAPE
Address: 548 TOWNE SQUARE WAY #714
City-St-Zip: ORLANDO, FL 32818

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: JOHN POLSON

D

05/05/2008

Electronic Signature of Signing Officer or Director

Date