

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007539

FILED  
Mar 05, 2010  
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:**

2037 HEMPEL AVENUE  
GOTHA, FL 34734

**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 ( )**

**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: CD  
Name: POLSON, JOHN  
Address: 268 BAYWEST NEIGHBORS CIR.  
City-St-Zip: ORLANDO, FL 32835

Title: D  
Name: SCHOENDORF, LYNN  
Address: 2223 CORAL POINT DR.  
City-St-Zip: CAPE CORAL, FL 33990

Title: D  
Name: ZIEGLER, DAWN  
Address: 3909 DUFFER RD  
City-St-Zip: SEBRING, FL 33872

Title: D  
Name: SWANK, HARRY  
Address: 5072 OAK CIRCLE  
City-St-Zip: SEBRING, FL 33875

Title: SD  
Name: CADETTE, JESSICA  
Address: 7001 ENVIRON BLVD #107  
City-St-Zip: LAUDERHILL, FL 33319

Title: VCD  
Name: RAYMER, JUSTIN  
Address: 9767 CARBONDALE DR E.  
City-St-Zip: JACKSONVILLE, FL 32208

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 POLSON

CD

03/05/2010

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

\_\_\_\_\_  
Date