

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Martin
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V35034 (0)**

1. Corporation Name
CAMP SUNSHINE SUMMER DAY CAMP, INC.



Principal Place of Business
**P.O. BOX 6504
HOLLYWOOD FL 33081**

Mailing Address
**P.O. BOX 6504
HOLLYWOOD FL 33081**

3. Date Incorporated or Qualified 05/11/1992	3a. Date of Last Report 05/01/1995
4. FEI Number 65-0333867	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. City
25. Country	30. City

9. Name and Address of Current Registered Agent

**DOUGHTY, JANICE
9108-A S.W. 19TH PLACE
FT. LAUDERDALE FL 33324**

10. Name and Address of New Registered Agent

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)
	1910 N. SURF ROAD #3
83. City	84. City
	HOLLYWOOD
85. Zip Code	86. Zip Code
	FL 33019

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the herein named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and address (typed or printed name of registered agent and address) (typed or printed name of registered agent and address)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	NAME
NAME	STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP
CITY-ST-ZIP	☐ DELETE
TITLE	NAME
NAME	STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP
CITY-ST-ZIP	☐ DELETE
TITLE	NAME
NAME	STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP
CITY-ST-ZIP	☐ DELETE
TITLE	NAME
NAME	STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP
CITY-ST-ZIP	☐ DELETE
TITLE	NAME
NAME	STREET ADDRESS
STREET ADDRESS	CITY-ST-ZIP
CITY-ST-ZIP	☐ DELETE

1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	☒ Change ☐ Addition
2. NAME	☐ Change ☐ Addition
3. NAME	☐ Change ☐ Addition
4. NAME	☐ Change ☐ Addition
5. NAME	☐ Change ☐ Addition
6. NAME	☐ Change ☐ Addition
7. NAME	☐ Change ☐ Addition
8. NAME	☐ Change ☐ Addition
9. NAME	☐ Change ☐ Addition
10. NAME	☐ Change ☐ Addition
11. NAME	☐ Change ☐ Addition
12. NAME	☐ Change ☐ Addition
13. NAME	☐ Change ☐ Addition
14. NAME	☐ Change ☐ Addition
15. NAME	☐ Change ☐ Addition
16. NAME	☐ Change ☐ Addition
17. NAME	☐ Change ☐ Addition
18. NAME	☐ Change ☐ Addition
19. NAME	☐ Change ☐ Addition
20. NAME	☐ Change ☐ Addition

**1910 N. SURF ROAD #3
HOLLYWOOD, FLORIDA 33019**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/96 (154) 961-9952

DATE OF SIGNATURE