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FILED  
May 07 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
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

2. Principal Place of Business

21 7000 SW 22 COURT  
Suite, Apt. #, etc.

22 SUITE 127-D  
City & State

23 DAVIE, Florida  
Zip

24 33317 Country

2a. Mailing Address

26 7000 S.W. 22 Court  
Suite, Apt. #, etc.

27 Suite 127-D  
City & State

28 DAVIE, FL.  
Zip

29 33317 Country

3. Date Incorporated or Qualified

05/11/1992

3a. Date of Last Report

04/25/1996

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

g. Name and Address of Current Registered Agent

DOUGHTY, JANICE  
1910 N. SURF ROAD #3  
HOLLYWOOD FL 33019

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-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

*Janice Doughty*

(NOTE: Registered Agent signature required when reinstating)

4/29/97

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME DOUGHTY, JANICE  
STREET ADDRESS 1910 N. SURF ROAD #3  
CITY-ST-ZIP HOLLYWOOD FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *Janice Doughty* Janice Doughty

4/29/97 (954) 473-2267 (CAMP)

CR2E034 (9/96)