

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 APR 26 AM 10:20

**DOCUMENT # 179742 (2)**

1. Corporation Name

**CAMPBELL PROPERTY MANAGEMENT AND REAL ESTATE, IN  
C.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

**1233 EAST HILLSBORO BLVD.  
DEERFIELD BEACH FL 33441**

Mailing Address

**1233 EAST HILLSBORO BLVD.  
DEERFIELD BEACH FL 33441**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

**07/22/1954**

3a. Date of Last Report

**03/24/1994**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

**59-6058170**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CAMPBELL, WILLIAM B., III  
1215 E HILLSBORO BLVD.  
DEERFIELD BCH FL 33441**

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

Signature, typed or printed name of registered agent and the 4 applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **V**  
NAME **CAMPBELL, W.B. JR.**  
STREET ADDRESS **1215 E HILLSBORO BLVD.**  
CITY-ST-ZIP **DEERFIELD BCH FL**

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

TITLE **S**  
NAME **LAWSON, BARBARA**  
STREET ADDRESS **1215 E HILLSBORO BLVD.**  
CITY-ST-ZIP **DEERFIELD BCH FL**

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

TITLE **V**  
NAME **CAMPBELL, WILLIAM B III**  
STREET ADDRESS **1215 E HILLSBORO BLVD.**  
CITY-ST-ZIP **DEERFIELD BCH FL**

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

TITLE **D**  
NAME **CAMPBELL, BRUCE R**  
STREET ADDRESS **1215 E HILLSBORO BLVD.**  
CITY-ST-ZIP **DEERFIELD BCH FL**

4.1 TITLE **PRESIDENT/DIRECTOR** ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **D**  
NAME **TIGHT, ALVIN J III**  
STREET ADDRESS **1215 E HILLSBORO BLVD.**  
CITY-ST-ZIP **DEERFIELD BCH FL**

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME **DIRECTOR**  
6.3 STREET ADDRESS **JAMES M. ROSEMURGY**  
6.4 CITY-ST-ZIP **2844 BANYON BLVD CIR, N.W.**  
**BOCA RATON, FLA 33431**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included 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 appointment with an address.

SIGNATURE

**William B. Campbell III**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/14/95**

**(305) 427-8770**  
DAYTIME PHONE