2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 264788

Title:

Name:

Address:

City-St-Zip:

FILED Jan 26, 2007 Secretary of State

Entity Name: CAMPUS LANDS CORP.							
Current Principal Place of Business:					New Principal Place of Business:		
6461 ROUT STANFORI	TE 82 DVILLE, NY 12	2581	US		285 FIFTH SUITE 450 BROOKLYI		5 US
Current Mailing Address:					New Mailing Address:		
P.O. BOX 3 STANFORI	370 DVILLE, NY 12	2581	US		285 FIFTH SUITE 450 BROOKLYI		5 US
FEI Number:	59-1009741	FEI Nu	ımber Applied For()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS ROAD SUITE 221 E PALM BEACH GARDENS, FL 33410 US							
The above in the State		ubmits	this statement for the pu	ırpose o	f changing it	ts registered	d office or registered agent, or both,
SIGNATURE:							
Electronic Signature of Registered Agent					Date		
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CS () GIARDINO, LUC ALGER COURT, BRONXVILLE, N	RIVERN			Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	PCEO () WECK, BRIAN P.O. BOX 59 STANFORDVILL	Delete .E, NY 1	2581		Title: Name: Address: City-St-Zip:		(X) Change()Addition AN E SUITE 450 , NY 11215 US
Title: Name: Address: City-St-Zip:	VP () WECK, DIANE P.O. BOX 370 STANFORDVILL	Delete .E, NY 1	2581		Title: Name: Address: City-St-Zip:	VP WECK, DIAN 285 5TH AVI BROOKLYN	E SUITE 450

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BRIAN WECK **PCEO** 01/26/2007

() Delete

ALGER COURT, RIVERMERE #2B

GIARDINO, CAROL

BRONXVILLE, NY 10708

() Change () Addition