

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 426418

FILED  
Apr 18, 2011  
Secretary of State

Entity Name: CAMPANILE & ASSOCIATES, INC.

**Current Principal Place of Business:**

6420 MAHI DRIVE  
CORAL GABLES, FL 33158 US

**New Principal Place of Business:**

**Current Mailing Address:**

6420 MAHI DRIVE  
CORAL GABLES, FL 33158 US

**New Mailing Address:**

FEI Number: 59-1486115

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CAMPANILE, LOUIS R  
6420 MAHI DRIVE  
CORAL GABLES, FL 33158 US

**Name and Address of New Registered Agent:**

CAMPANILE, LOUIS R SR.  
6420 MAHI DRIVE  
CORAL GABLES, FL 33158 US

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: LOUIS R.CAMPANILE, SR.

04/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CAMPANILE, LOUIS R SR.  
Address: 6420 MAHI DRIVE  
City-St-Zip: CORAL GABLES, FL 33158

Title: STD  
Name: CAMPANILE, ANTHONY  
Address: 6420 MAHI DRIVE  
City-St-Zip: CORAL GABLES, FL 33158

Title: VPD  
Name: CAMPANILE, ANTHONY  
Address: 6420 MAHI DRIVE  
City-St-Zip: CORAL GABLES, FL 33158

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LOUIS R. CAMPANILE, SR.

PD

04/18/2011

Electronic Signature of Signing Officer or Director

Date