


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Apr 18, 2007 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # A14464 1. Entity Name CAMPBELL ARMS LIMITED PARTNERSHIP |  |
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|--|--|
| Principal Place of Business 12100 WILSHIRE BLVD STE 1400 LOS ANGELES, CA 90025 US | Mailing Address 12100 WILSHIRE BLVD STE 1400 LOS ANGELES, CA 90025 US |
|--|--|

DO NOT WRITE IN THIS SPACE



04092007 No Chg-LP CR2E003 (12/06)

| | |
|---|---------------------------------------|
| 4. FEI Number 58-1566533 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

DOUGLAS H. REYNOLDS, P.A.
4875 NORTH FEDERAL HIGHWAY, 10TH FLOOR
SOUTHTRUST BANK BUILDING
FORT LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

| | |
|--|------------|
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small> | DATE _____ |
|--|------------|

| | |
|--|--|
| FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00 | |
|--|--|

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

| 12. GENERAL PARTNER INFORMATION | |
|---------------------------------|------------------------|
| DOCUMENT # | P04497 |
| NAME | WILSHIRE INVEST. CORP. |
| STREET ADDRESS | 12100 WILSHIRE BLVD |
| CITY-ST-ZIP | LOS ANGELES, CA |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
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| STREET ADDRESS | |
| CITY-ST-ZIP | |

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04/28/07-80002-011 500.00

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

Wilshire Investments Corporation, General Partner
By: Jay Wall, Vice President

SIGNATURE: _____
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date _____ Daytime Phone # _____