2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2005
Secretary of State

DOCUMENT# F04000000154

Entity Name: CAMPBELL AGENCY, INC.

Current Principal Place of Business:

325 84TH STREET S.W.
BYRON CENTER, MI 49315

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1788
GRAND RAPIDS, MI 495011788

New Mailing Address:

FEI Number: 32-0022430 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WABEKE, MARK
4625 EAST BAY DRIVE #227
CLEARWATER, FL 337645736 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	C	( ) Delete
Name:	BARNABY, MERLE S	
Address:	9560 KALAMAZOO AVE., SE	
City-St-Zip:	CALEDONIA, MI 49316	
Title:	P	( ) Delete
Name:	SCHINNERER, EDWARD M JR.	
Address:	1491 FAIRWOOD COURT	
City-St-Zip:	CALEDONIA, MI 49316	
Title:	V	( ) Delete
Name:	VAN DAM, PAUL L	
Address:	3681 144TH AVENUE	
City-St-Zip:	HAMILTON, MI 49419	
Title:	V	( ) Delete
Name:	GENZINK, TIMOTHY	
Address:	3603 ELK CT.	
City-St-Zip:	ZEELAND, MI 49464	
Title:	V	( ) Delete
Name:	WABEKE, MARK	
Address:	P.O. BOX 1495	
City-St-Zip:	LARGO, FL 33779	
Title:	V	( ) Delete
Name:	BARNABY, CURTIS L	
Address:	3448 92ND ST., SE	
City-St-Zip:	CALEDONIA, MI 49316	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: EDWARD M. SCHINNERER, JR. P 01/11/2005

Electronic Signature of Signing Officer or Director — Date