

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # F15599**

1. Entity Name  
CAMERON, HODGES, COLEMAN, LAPOINTE & WRIGHT,  
P.A.



Principal Place of Business  
150 SOUTH PALMETTO AVE  
STE 101  
DAYTONA BEACH, FL 32114

Mailing Address  
150 SOUTH PALMETTO AVE  
STE 101  
DAYTONA BEACH, FL 32114



02072008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2042621

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

CAMERON A. CRAIG  
15 W CHURCH STREET  
STE 301  
ORLANDO, FL 32801-3351

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME CAMERON, A CRAIG  
STREET ADDRESS 15 W CHURCH STREET STE 301  
CITY-ST-ZIP ORLANDO, FL 328013351

TITLE VD  
NAME HODGES, E PEYTON  
STREET ADDRESS 15 W CHURCH STREET STE 301  
CITY-ST-ZIP ORLANDO, FL 328013351

TITLE STD  
NAME COLEMAN, CHRISTOPHER C  
STREET ADDRESS 25 E SILVER SPRINGS BLVD  
CITY-ST-ZIP OCALA, FL 34470

TITLE D  
NAME LAPOINTE, DOUGLAS J  
STREET ADDRESS 15 W CHURCH STREET STE 301  
CITY-ST-ZIP ORLANDO, FL 32801

TITLE D  
NAME WRIGHT, VIRGIL III  
STREET ADDRESS 25 E SILVER SPRINGS BLVD  
CITY-ST-ZIP OCALA, FL 34470

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000825189  
02/20/08-80109-013 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** A. CRAIG CAMERON **PRESIDENT**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**PHONE - 407.841.5030**  
**FEBRUARY 7, 2008**  
Date Daytime Phone #