FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1997 8:00am

Secretary of State

96/6)

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000004274 (5)

CAMPBELL & COMPANY TRADING ADVISORS, INC.

Principal Place of Business Mailing Address 210 W. PENNSYLVANIA AVE., #770 210 W. PENINSYLVANIA AVE., #770 BALTIMORE MD 21204-5325 BALTIMORE MD 21204 3. Date Incorporated or Qualified 3a. Date of Last Report 09/05/1995 06/20/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 52-1114143 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 30 Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HOLLINGSWORTH, WAYNE **HWY 778** 82 Street Address (P.O. Box Number is Not Acceptable) FT. WHITE FL 32038 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Addition 1.1 TITLE ☐ Change TITLE CLELAND, BRUCE L NAME 1.2 NAME 210 W. PENNSYLVANIA AVE., #770 STREET ADDRESS 1.3 STREET ADDRESS **BALTIMORE MD 21204** 1.4 CiTY - ST - ZiP CITY-ST-7IP DELETE 2.1 TITLE Change Addition TITLE LIVESEY, THERESA D NAME 2.2 NAME 210 W. PENNSYLVANIA AVE., #770 STREET ADDRESS 2.3 STREET ADDRESS **BALTIMORE MD 21204** 2. 4 CITY - ST- ZIP CITY-ST-ZIP Change DC DELETE ___ Addition 3.1 TITLE TITLE CAMPBELL, D K 3.2 NAME NAME 210 W. PENNSYLVANIA AVE., #770 STREET ADDRESS 3.3 STREET ADDRESS **BALTIMORE MD 21204** CITY: ST-ZIF 3.4. CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE LITTLE, JAMES A NAME 4.2 NAME 210 W. PENNSYLVANIA AVE., #770 STREET ADDRESS 4.3 STREET ADDRESS **BALTIMORE MD 21204** CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change THLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 6.1 TITLE

6.2 NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.