

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90160 039 ***150.00

DOCUMENT # F95000004274

1. Entity Name

Campbell + Company, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

210 W. Pennsylvania Ave

Suite, Apt. #, etc.

Suite 770

3. Mailing Address

Same

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Towson, MD

City & State

4. FEI Number

52-1114143

Applied For

☒ **Not Applicable**

Zip

21204

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Hollingsworth, Wayne

Street Address (P.O. Box Number is Not Acceptable)

Hwy 778

City

Fort White,

FL

Zip Code

32038

**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.

SIGNATURE

N/A

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☒

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	<i>P</i>
NAME	<i>Cielands Bruce L.</i>
STREET ADDRESS	<i>210 W. Pennsylvania Ave #770</i>
CITY - ST - ZIP	<i>Baltimore, MD 21204</i>
TITLE	<i>ST</i>
NAME	<i>Becks, Theresa D</i>
STREET ADDRESS	<i>210 W. Pennsylvania Ave #770</i>
CITY - ST - ZIP	<i>Towson, MD 21204</i>
TITLE	<i>DC</i>
NAME	<i>Campbell, D.K.</i>
STREET ADDRESS	<i>210 W. Pennsylvania Ave #770</i>
CITY - ST - ZIP	<i>Baltimore, MD 21204</i>
TITLE	<i>P</i>
NAME	<i>Little, James A.</i>
STREET ADDRESS	<i>210 W. Pennsylvania Ave #770</i>
CITY - ST - ZIP	<i>Towson, MD 21204</i>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

13. I 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 report or supplemental report is true and accurate. 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 11 or on an attachment with an address, with all other officers and directors.

SIGNATURE:

Theresa D Becks

**CHIEF FINANCIAL OFFICER
CAMPBELL & COMPANY, INC.**

4-25-02

410-842-4631

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #