2008 FOR PROFIT CORPORATION

FILED Jan 11, 2008 08:00 AN Secretary of State

ANNUAL REPORT							
DOCUMENT # H3636 1. Entity Name CAMP & CAMP, P.A.	7						
Principal Place of Business	Mailing Address						
111 SE 12 STREET	111 SE 12 STREET						
FORT LAUDERDALE, FL 33316	FORT LAUDERDALE, FL 33316						

111 SE 12 S	STREET	Mailing Address 111 SE 12 STREET FORT LAUDERDALE, FL 33316	i		: 1	: 	B) B) B B B B B B B B B B B B B B B B B
6. Name and Address of Current Registered Agent CAMP, JAMES D JR 111 SE 12 STREET FORT LAUDERDALE, FL 33316			O1042008 No Chg-P CR2E034 (11/05) 4. FEI Number S9-2449128 Applied For Not Applicate of Status Desired S8.75 Additional Fee Required DO NOT WRITE IN THIS SPACE				
the obligat	Signature, typed or printed name of registered agent and til		d Agent signature requir	ed when reinstating)	000001	DATE 779664	
After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Trust Fund Contribution.		5.00 May Be Ided to Fees	01/11/08-	80045-021	150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PT CAMP, JAMES D III 111 SE 12TH STREET FORT LAUDERDALE, FL 33316 VS CAMP, JAMES D JR 111 SE 12TH STREET FORT LAUDERDALE, FL 33316	autono					
TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP					NOT WE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP							

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 of 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 all other like empowered.

SIGNATURÈ