

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000105983

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Entity Name:** VENTURES BY CAMPBELL LLC

**Current Principal Place of Business:**

11841 US HWY 41 S  
GIBSONTON, FL 33534

**New Principal Place of Business:**

2820 UNIVERSITY SQUARE DR  
TAMPA, FL 33612

**Current Mailing Address:**

11841 US HWY 41 S  
GIBSONTON, FL 33534

**New Mailing Address:**

2820 UNIVERSITY SQUARE DR  
TAMPA, FL 33612

**FEI Number:** 27-3705863

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAMPBELL, MICHAEL B  
11841 US HWY 41 S  
GIBSONTON, FL 33534 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** CAMPBELL, MICHAEL B  
**Address:** 3814 SLEEPY HILL OAKS LOOP  
**City-St-Zip:** LAKELAND, FL 33810 US

**Title:** MGRM  
**Name:** CAMPBELL, TIMOTHY P  
**Address:** 6529 CLAIR SHORE DR  
**City-St-Zip:** APOLLO BEACH, FL 33572

**Title:** MGRM  
**Name:** CAMPBELL, BILL  
**Address:** 15708 CARLTON LAKE RD.  
**City-St-Zip:** WIMAUMA, FL 33598

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** MICHAEL CAMPBELL

MGRM

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date