


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # L76091 1. Entity Name CAMPBELL'S ORNAMENTAL CONCRETE, INC.	
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Principal Place of Business C/O ELIZABETH J. CAMPBELL 1930 PINE ISLAND RD N.E. CAPE CORAL, FL 33909 US	Mailing Address C/O ELIZABETH J. CAMPBELL 1930 PINE ISLAND ROAD N.E. CAPE CORAL, FL 33909 US
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01252006 No Chg-P CR2E034 (11/05)

4. FEI Number **65-0192864** Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent CAMPBELL, ELIZABETH J. 1930 PINE ISLAND RD N.E. CAPE CORAL, FL 33909
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**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, 2006 Fee will be \$550.00**

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

**U00000470074
03/27/06-80026-025 150.00**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO CAMPBELL, MASON JR. 1206 S.E. 42ND STREET CAPE CORAL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOUNT, JEANINE M. 4110 S.E. 3RD AVENUE CAPE CORAL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CAMPBELL, PAUL V. 1206 S.E. 42ND STREET CAPE CORAL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CAMPBELL, ELIZABETH J. 1206 S.E. 42ND STREET CAPE CORAL, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-14-06

Date

Daytime Phone #