

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005781

FILED
May 01, 2007
Secretary of State

Entity Name: CAMPBELL ARMS RESIDENCE CORPORATION

Current Principal Place of Business:

300 NW 12 AVE
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

300 NW 12 AVE
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-0676431 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MARTORANO, SALVATORE
300 NW 12TH AVE
MIAMI, FL 33128 US

Name and Address of New Registered Agent:

DOMINGUEZ, AGUSTIN
300 NW 12TH AVE
MIAMI, FL 33128 US

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: AGUSTIN DOMINGUEZ

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SIBLEY, RUSSELL A
Address: 300 NW 12TH AVE
City-St-Zip: MIAMI, FL 33128

Title: V () Delete
Name: REVALES, RON
Address: 300 NW 12TH AVE
City-St-Zip: MIAMI, FL 33128

Title: V () Delete
Name: ROVIN, TY
Address: 300 NW 12TH AVE
City-St-Zip: MIAMI, FL 33128

Title: S () Delete
Name: RODRIGUEZ, KATHY
Address: 300 NW 12 AVENUE
City-St-Zip: MIAMI, FL 33128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AGUSTIN DOMINGUEZ

RA

05/01/2007

Electronic Signature of Signing Officer or Director

Date