

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000078098

**FILED**  
**May 14, 2010**  
**Secretary of State**

**Entity Name:** CAMPBELL CONSULTING & CONTRACTING, INC.

**Current Principal Place of Business:**

2130 SW 13TH AVE.  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

2130 SW 13TH AVE.  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 65-1126117      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CAMPBELL, CHARLENE C  
2130 SW 13TH AVE.  
CAPE CORAL, FL 33914      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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CAMPBELL, CHARLENE C  
Address: 2130 SW 13TH AVE.  
City-St-Zip: CAPE CORAL, FL 33914

Title: VP  
Name: ELKINS, CHALMER  
Address: 1570 QUAIL TRAIL  
City-St-Zip: FT. MYERS, FL 33912 US

Title: SEC  
Name: FOSTER, JAMES  
Address: 7302 LOBELIA RD  
City-St-Zip: FT. MYERS, FL 33967 US

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLENE CAMPBELL

PRES

05/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date