

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098036

**FILED**  
**Mar 26, 2009**  
**Secretary of State**

**Entity Name:** CAMPBELL'S COATINGS INC.

**Current Principal Place of Business:**

519 PLANTERS MANOR WAY  
BRADENTON, FL 34212

**New Principal Place of Business:**

**Current Mailing Address:**

519 PLANTERS MANOR WAY  
BRADENTON, FL 34212

**New Mailing Address:**

FEI Number: 03-0498657

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAMPBELL, WILLIAM M  
519 PLANERS MAOR WAY  
BRADENTON, FL 34212 US

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

CAMPBELL, WILLIAM M  
519 PLANTERS MANOR WAY  
BRADENTON, FL 34212 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/26/2009

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CAMPBELL, WILLIAM M  
Address: 519 PLANTERS MANOR WAY  
City-St-Zip: BRADENTON, FL 34212

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

SIGNATURE: WILLIAM M CAMPBELL

Electronic Signature of Signing Officer or Director

P

03/26/2009

Date