

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000146560

FILED
Apr 13, 2006
Secretary of State

Entity Name: JEFF CAMPBELL INSURANCE AGENCY, INC.

Current Principal Place of Business:

902 B SOUTH PALM BLVD
NICEVILLE, FL 32578

New Principal Place of Business:

1165 E. JOHN SIMS PKWY
NICEVILLE, FL 32578

Current Mailing Address:

902 B SOUTH PALM BLVD
NICEVILLE, FL 32578

New Mailing Address:

1165 E. JOHN SIMS PKWY
NICEVILLE, FL 32578

FEI Number: 11-3731894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P., A.
1840 SW 22 ST 4TH FL
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CAMPBELL, JEFFREY
Address: 902 B SOUTH PALM BLVD
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: CAMPBELL, JEFFREY
Address: 1165 E. JOHN SIMS PKWY
City-St-Zip: NICEVILLE, FL 32578

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY CAMPBELL

PSTD

04/13/2006

Electronic Signature of Signing Officer or Director

Date