

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036653

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: AMERICAN FAMILY INVESTMENTS, INC.

**Current Principal Place of Business:**

2866 N HWY 95A  
CANTONMENT, FL 32533 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 849  
GONZALEZ, FL 32560 US

**New Mailing Address:**

FEI Number: 20-3009773

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAMPBELL, C.R. SR.  
10391 OLD DAIRY LANE  
PENSACOLA, FL 32534 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: P ( ) Delete  
Name: CAMPBELL, C.R. SR.  
Address: 10391 OLD DAIRY LANE  
City-St-Zip: PENSACOLA, FL 32534 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PD (X) Change ( ) Addition  
Name: CAMPBELL, C.R. SR.  
Address: 10391 OLD DAIRY LANE  
City-St-Zip: PENSACOLA, FL 32534 US

Title: VD ( ) Change (X) Addition  
Name: CAMPBELL, BILLY R  
Address: 1340 BRICKTON ROAD  
City-St-Zip: MOLINO, FL 32577

Title: VD ( ) Change (X) Addition  
Name: CAMPBELL, MICHAEL C  
Address: P.O. BOX 159  
City-St-Zip: JAY, FL 32565

Title: STD ( ) Change (X) Addition  
Name: CAMPBELL, KAY  
Address: 1340 BRICKTON ROAD  
City-St-Zip: MOLINO, FL 32577

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: KAY CAMPBELL

ST

01/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date