

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140637

FILED
Jan 17, 2009
Secretary of State

Entity Name: CAMPBELL, CARRELLI @ ASSOCIATES, INC

Current Principal Place of Business:

1751 ASTOR FARMS PLACE
SANFORD, FL 32771 US

New Principal Place of Business:

507 SMOKERISE BLVD
LONGWOOD, FL 32779 US

Current Mailing Address:

1751 ASTOR FARMS PLACE
SANFORD, FL 32771 US

New Mailing Address:

507 SMOKERISE BLVD
LONGWOOD, FL 32779 US

FEI Number: 20-3675064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAMPBELL, CORNELIA C
1751 ASTOR FARMS PLACE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

CAMPBELL, CORNELIA C
507 SMOKERISE BLVD
LONGWOOD, FL 32779 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:

01/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARRELLI, MICHELLE C
Address: 1751 ASTOR FARMS PLACE
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARRELLI, MICHELLE C
Address: 507 SMOKERISE BLVD
City-St-Zip: LONGWOOD, FL 32779 US

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: MICHELLE CARRELLI

P

01/17/2009

Electronic Signature of Signing Officer or Director

Date