## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000030293

Entity Name: CAMPBELL CLASSICS CORPORATION

FILED Jun 09, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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904 S. STATE RD. 19 PALATKA, FL 32177

Current Mailing Address: New Mailing Address:

904 S. STATE RD. 19
PALATKA, FL 32177
4075 SILVER LAKE DRIVE
PALATKA, FL 32177

FEI Number: 77-0674084 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SPEAS, CARON 613 ST. JOHNS AVE., STE. 203 PALATKA, FL 32177 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:

Title:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

D ( ) Delete Title: D (X) Change ( ) Addition

CAMPBELL, NORMAN Name: CAMPBELL, NORMAN

 Name:
 CAMPBELL, NORMAN
 Name:
 CAMPBELL, NORMAN

 Address:
 904 S. STATE RD. 19
 Address:
 4075 SILVER LAKE DRIVE

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 PALATKA, FL 32177

Title: D () Delete Title: D (X) Change () Addition

 Name:
 CAMPBELL, JOANN
 Name:
 CAMPBELL, JOANN

 Address:
 904 S. STATE RD. 19
 Address:
 4075 SILVER LAKE DRIVE

 City-St-Zip:
 PALATKA, FL 32177
 City-St-Zip:
 PALATKA, FL 32177

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: JOANN CAMPBELL D 06/09/2008