

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000034173

FILED
Aug 12, 2009
Secretary of State

Entity Name: CAMPBELL INVESTMENTS HOLDING, INC.

Current Principal Place of Business:

1066 HARMONY LN
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

1066 HARMONY LN
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 26-2341538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, CHRISTOPHER
1066 HARMONY LN
CLERMONT, FL 34711 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

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:

Title: P () Delete
Name: CAMPBELL, CHRISTOPHER L
Address: 1066 HARMONY LN
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: CAMPBELL, ANTHONY L
Address: 1066 HARMONY LN
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: CAMPBELL, JOHANNA S
Address: 1066 HARMONY LN
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: EBANKS, MICHAEL S
Address: 612 RUTLEDGE WAY
City-St-Zip: EVANS, GA 30809

Title: PD () Delete
Name: CAMPBELL, CHRISTOPHER
Address: 1066 HARMONY LN
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAMPBELL, CHRISTOPHER L
Address: 1066 HARMONY LN
City-St-Zip: CLERMONT, FL 34711

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CAMPBELL, ARIEL S
Address: 1066 HARMONY LN
City-St-Zip: CLERMONT, FL 34711

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: CHRISTOPHER L. CAMPBELL

PD

08/12/2009

Electronic Signature of Signing Officer or Director

Date