

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000063320

FILED
Jan 22, 2012
Secretary of State

Entity Name: CAMPBELLS ADULT FAMILY CARE HOME, INC.

Current Principal Place of Business:

320 PENNSYLVANIA AVE.
FT. LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

320 PENNSYLVANIA AVE.
FT. LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 01-0924864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, IVANIO
320 PENNSYLVANIA AVE.
FT. LAUDERDALE, FL 33312 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

OFFICERS AND DIRECTORS:

Title: PD
Name: CAMPBELL, ANNMARIE
Address: 320 PENNSYLVANIA AVE.
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: VD
Name: CAMPBELL, IVANIO
Address: 320 PENNSYLVANIA AVE.
City-St-Zip: FT. LAUDERDALE, FL 33312

I hereby 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 all other like empowered.

SIGNATURE: ANNMARIE CAMPBELL

PD

01/22/2012

Electronic Signature of Signing Officer or Director

Date