

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000006620

FILED
Jul 01, 2006
Secretary of State

Entity Name: C.A.M. ACCOUNTING & PROPERTY SERVICES, INC.

Current Principal Place of Business:

5635 S.W. 164 TERRACE
SOUTHWEST RANCHES, FL 33331

New Principal Place of Business:

Current Mailing Address:

5635 S.W. 164 TERRACE
SOUTHWEST RANCHES, FL 33331

New Mailing Address:

FEI Number: 65-0374882

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEICE, KAREN
5635 SW 164 TERRACE
SOUTHWEST RANCHES, FL 33331 US

Name and Address of New Registered Agent:

JHONSON, KAREN
5635 SW 164 TERRACE
SOUTHWEST RANCHES, FL 33331 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: KAREN JHONSON

07/01/2006

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: NEICE, KAREN
Address: 5635 SW 164 TERRACE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: VP () Delete
Name: JOHNSON, DON
Address: 5635 SW 164 TERRACE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JHONSON, KAREN
Address: 5635 SW 164 TERRACE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: VP (X) Change () Addition
Name: JHONSON, DON
Address: 5635 SW 164 TERRACE
City-St-Zip: SOUTHWEST RANCHES, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN JHONSON

PRES

07/01/2006

Electronic Signature of Signing Officer or Director

Date