

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000060831

Entity Name: CAMPECHANGA, INC.

FILED  
Jan 07, 2012  
Secretary of State

**Current Principal Place of Business:**

127 1ST. AVE. N.  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

127 1ST. AVE. N.  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

FEI Number: 59-3263979

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DOYLE, WILLIAM E  
2121 CORPORATE SQ BLVD  
JACKSONVILLE, FL 32216 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: D  
Name: SPROWELL, THOMAS W  
Address: 99 VOYAGER CT  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D  
Name: MCGUIRE, VINCE  
Address: 155 PINE ST  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: PRES  
Name: BOULIER, DAVID L  
Address: 11136 LANDS END LN  
City-St-Zip: JACKSONVILLE, FL 32225

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: DAVID L. BOULIER

PRES

01/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date