

## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000029329

Entity Name: C & C COPY SERVICE, INC.

FILED  
Nov 22, 2006  
Secretary of State

### Current Principal Place of Business:

655 W 8TH ST  
JACKSONVILLE, FL 32209

### New Principal Place of Business:

3033 HARTLEY RD  
SUITE 1  
JACKSONVILLE, FL 32257 US

### Current Mailing Address:

P.O. BOX 16428  
JACKSONVILLE, FL 322456428

### New Mailing Address:

P.O. BOX 16428  
JACKSONVILLE, FL 322456428 US

FEI Number: 59-3305664

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

### Name and Address of Current Registered Agent:

CAMPBELL, WARD W  
12195 BASALT DR. N.  
JACKSONVILLE, FL 32246 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 ( ) Delete  
Name: CAMPBELL, WARD  
Address: 12195 BASALT DR N  
City-St-Zip: JACKSONVILLE, FL 32246

Title: VDST ( ) Delete  
Name: CAMPBELL, GLENETTA  
Address: 12195 BASALT DR N  
City-St-Zip: JACKSONVILLE, FL 32246

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CAMPBELL, WARD  
Address: 12195 BASALT DR N  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: VDST (X) Change ( ) Addition  
Name: CAMPBELL, GLENETTA  
Address: 12195 BASALT DR N  
City-St-Zip: JACKSONVILLE, FL 32246 US

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: WARD W CAMPBELL

PD

11/22/2006

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

\_\_\_\_\_  
Date