

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000058621

**Entity Name:** CAMPEN PROPERTIES LLC

**Current Principal Place of Business:**

2160 PARK STREET  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

2160 PARK STREET  
JACKSONVILLE, FL 32204 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CAMPEN, BEN H  
2160 PARK STREET  
JACKSONVILLE, FL 32204 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CAMPEN, BEN H  
Address 2160 PARK STREET  
City-State-Zip: JACKSONVILLE FL 32204

Title MGR  
Name CAMPEN, BEN  
Address 5348 NW 9TH LANE  
City-State-Zip: GAINESVILLE FL 32605

Title SEC  
Name CAMPEN, ROBIN M  
Address 2160 PARK STREET  
City-State-Zip: JACKSONVILLE FL 32204

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BENJAMIN H CAMPEN

PSD

03/17/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date