

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 12, 1999 8:00 am
Secretary of State

07-12-1999 90021 002 ***550.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # V21014

1. Corporation Name
CAMPBELL CONSULTING SERVICES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 19 SUMMIT CLUB DR, MARIETTA GA 30068
 Mailing Address: 449 SUMMIT CLUB DR, MARIETTA GA 30068, US

3. Date incorporated or Qualified: 03/09/1992
 4. FEI Number: 65-0328303
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property: Yes No

2a. Mailing Address: 26, 27, 28, 29, 30
 25, 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAMPBELL, BRUCE R.
 1864 JUNO ISLES BLVD.
 JUNO BEACH FL 33408

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|------------------------|---------------------------------|---|---|
| 1. NAME | <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2. ADDRESS | | 1.2 NAME | |
| 3. CITY-STATE-ZIP | | 1.3 STREET ADDRESS | |
| | | 1.4 CITY-ST-ZIP | |
| 4. NAME | <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5. ADDRESS | | 2.2 NAME | |
| 6. CITY-STATE-ZIP | | 2.3 STREET ADDRESS | |
| | | 2.4 CITY-ST-ZIP | |
| 7. NAME | <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 8. ADDRESS | | 3.2 NAME | |
| 9. CITY-STATE-ZIP | | 3.3 STREET ADDRESS | |
| | | 3.4 CITY-ST-ZIP | |
| 10. NAME | <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 11. ADDRESS | | 4.2 NAME | |
| 12. CITY-STATE-ZIP | | 4.3 STREET ADDRESS | |
| | | 4.4 CITY-ST-ZIP | |
| 13. NAME | <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 14. ADDRESS | | 5.2 NAME | |
| 15. CITY-STATE-ZIP | | 5.3 STREET ADDRESS | |
| | | 5.4 CITY-ST-ZIP | |
| 16. NAME | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 17. ADDRESS | | 6.2 NAME | |
| 18. CITY-STATE-ZIP | | 6.3 STREET ADDRESS | |
| | | 6.4 CITY-ST-ZIP | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 7/4/99 404 515 8248

CR2E034 (5/99)