


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000035668	
1. Entity Name CAMMANN INVESTMENTS, LLC	

Principal Place of Business 3108 FAIR OAKS AVENUE TAMPA, FL 33611	Mailing Address 3108 FAIR OAKS AVENUE TAMPA, FL 33611
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DO NOT WRITE IN THIS SPACE



01062008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4644570	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

CAMMANN, WILLIAM G
 3108 FAIR OAKS AVENUE
 TAMPA, FL 33611

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* **NO change** *[Signature]*

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CAMMANN, WILLIAM G 3108 FAIR OAKS AVENUE TAMPA, FL 33611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CAMMANN, MARJORIE A 3108 FAIR OAKS AVENUE TAMPA, FL 33611
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 01/17/08-80050-003 138.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: *[Signature]* **1-15-08** **813 240**
Signature AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date **3720** Daytime Phone #