

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000056089

FILED
Jan 26, 2008
Secretary of State

Entity Name: CHAPAE, LLC

Current Principal Place of Business:

P.O. BOX 4098
101 SOUTH BAY BLVD., #A-4
ANNA MARIA, FL 34216

New Principal Place of Business:

101 SOUTH BAY BLVD.
#A-4
ANNA MARIA, FL 34216 US

Current Mailing Address:

P.O. BOX 4098
101 SOUTH BAY BLVD., #A-4
ANNA MARIA, FL 34216

New Mailing Address:

P.O. BOX 4098
101 SOUTH BAY BLVD., #A-4
ANNA MARIA, FL 34216 US

FEI Number: 20-4988928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTER&ASSOCIATES, LLC
3909 E BAY DR.
HIOLMES BEACH, FL 34217 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SLUSSER, PATRICIA
Address: P.O. BOX 4098, 101 SOUTH BAY BLVD. #A-4
City-St-Zip: ANNA MARIA, FL 34216

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SLUSSER, PATRICIA
Address: P.O. BOX 4098, 101 SOUTH BAY BLVD. #A-4
City-St-Zip: ANNA MARIA, FL 34216 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SLUSSER, PATRICIA

MGR

01/26/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date