

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088148

FILED
Apr 24, 2008
Secretary of State

Entity Name: CAMMAC CUSTOM HOMES, LLC

Current Principal Place of Business:

1013 MONTANA STREET, STE B
ORLANDO, FL 32803

New Principal Place of Business:

907 OUTER RD
ORLANDO, FL 32814

Current Mailing Address:

1013 MONTANA STREET, STE B
ORLANDO, FL 32803

New Mailing Address:

907 OUTER RD
ORLANDO, FL 32814

FEI Number: 20-5558915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHAN, NISHAD A
111 NORTH ORANGE AVENUE, STE 1200
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

KHAN, NISHAD A
907 OUTER RD
ORLANDO, FL 32814 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: _____

04/24/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: MOHAMMED, CHAUDHRY A
Address: 1013 MONTANA ST., SUITE B
City-St-Zip: ORLANDO, FL 32803

Title: SECR () Delete
Name: MUGHIS, CHAUDHRY A
Address: 1013 MONTANA ST., SUITE B
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: MOHAMMED, CHAUDHRY A
Address: 907 OUTER RD
City-St-Zip: ORLANDO, FL 32814

Title: SECR (X) Change () Addition
Name: MUGHIS, CHAUDHRY A
Address: 907 OUTER RD
City-St-Zip: ORLANDO, FL 32814

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: MUGHIS A. CHAUDHRY

SECR

04/24/2008

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