

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000010179

1. Entity Name
CAMCORP HOLDINGS, LLC



Principal Place of Business
2001 PALM BEACH LAKES BLVD
502-G
WEST PALM BEACH, FL 33409

Mailing Address
2001 PALM BEACH LAKES BLVD
502-G
WEST PALM BEACH, FL 33409



02232006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-1115142** Applied For Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CAMREON, DONALD
2001 PALM BEACH LAKES BLVD
SUITE 502-G
WEST PALM BEACH, FL 33409

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

Filing Fee is \$50.00
Due by May 1, 2006

1100000466637
 03/23/06-80017-016 \$0.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CAMERON, DONALD 8394 MAN O WAR RD WEST PALM BEACH, FL 33418
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CAMERON, JUDITH 8394 MAN O WAR RD WEST PALM BEACH, FL 33418
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: _____ Date **3/8/06** Daytime Phone # **561-478-1840**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE