

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017739

Entity Name: VOLCANO PARTNERS LLC

FILED  
Apr 24, 2007  
Secretary of State

## Current Principal Place of Business:

1121 CRANDON BLVD.  
F 907  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

## Current Mailing Address:

1121 CRANDON BLVD.  
F 907  
KEY BISCAYNE, FL 33149

## New Mailing Address:

FEI Number: 11-3681206

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ENDACOTT, ROBERT D  
1121 CRANDON BLVD  
F 907  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

ENDACOTT, CLAUDETTE  
1121 CRANDON BLVD  
F 907  
KEY BISCAYNE, FL 33149 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: CLAUDETTE ENDACOTT

04/24/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ENDACOTT, ROBERT  
Address: 1121 CRANDON BLVD F 907  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGR ( ) Delete  
Name: WRIGHT, RANDOLPH  
Address: 255 EAST BROWN ST S 320  
City-St-Zip: BIRMINGHAM, MI 48009

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ENDACOTT, CLAUDETTE  
Address: 1121 CRANDON BLVD F 907  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: CHATELAIN, CURT  
Address: 108 STONEWOOD CIRCLE  
City-St-Zip: LAFAYETE, LA 70508

I hereby certify that the information supplied with this filing does not qualify for the 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: CLAUDETTE ENDACOTT

MGRM

04/24/2007

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