

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000001102

1. Entity Name
CAMP CHARTERS, LLC



Principal Place of Business Mailing Address

**C/O KAY STATZ
 3620 NE 2 AVENUE
 MIAMI FL 33137**

**C/O KAY STATZ
 3620 NE 2 AVENUE
 MIAMI FL 33137**



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

1st MOORE CR2E083 (10/07)

6. Name and Address of Current Registered Agent

**STATZ, KAY
 C/O KAY STATZ
 3620 NE 2 AVENUE
 MIAMI FL 33137**

4. FEI Number Applied For

01-0576852 Not Applicable

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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's signature required when registering) _____ DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS

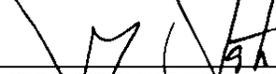
TITLE	MGR	<input type="checkbox"/> Delete
NAME	STATZ, KAY M	
STREET ADDRESS	3620 NE 2ND AVE	
CITY - ST - ZIP	MIAMI FL 33137	
TITLE		<input type="checkbox"/> Delete
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10. ADDITIONS / CHANGES

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 02/12/08-80074-014 138.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  **Kay M. Statz** 2/1/08 786-210-3693

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Digital Print #