2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Apr 29, 2008 08:00 AN Secretary of State

| | | | Т |
|------|--------|--------------|---|
| DOCU | MENT#L | .02000002944 | |

1. Entity Name LOOSERS CAMP LLC



Principal Place of Business

SIGNATURE:

Mailing Address

700 ELEVENTH STREET SOUTH, PH 2 NAPLES, FL 34102-6777

700 ELEVENTH STREET SOUTH, PH 2 NAPLES, FL 34102-6777



239.430.4310

Daytime Phone #

4-10-08

03102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-0860684

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ABLE ADVISORY, INC 700 ELEVENTH STREET SOUTH, PH 2 NAPLES, FL 34102-6777

DO NOT WRITE IN THIS SPACE

| SIGNATURE. | Signature, typed or primted name of registered agent and title if applicable | (NOTE: Registered Agant signature required when reinstating) | DATE |
|---|---|--|--|
| FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | | | U00000931762 05/22/08-80027-021 138.7 |
| 9. | MANAGING MEMBERS/MANAGERS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR AOMAC LIMITED BISON COURT ROAD TOWN, TORTALA BRITISH VIRGIN ISLANDS, | | , |
| TITLE NAME STREET ADDRESS CITY - S1 - ZIP | | ** | : · · |
| TITLE STAME STREET ADDRESS CITY-ST-ZIP | | DO N | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | , | IN T | HIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | · · · |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | • |
| indicated | certify that the information supplied with this filing does not on this report is true and accurate and that my signature : ability company or the receiver or trustee empowered to ex- | shall have the same legal effect as it made under oath | i, that I am a managing member or manager of the |

NTEO NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE