2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# L02000007969

Entity Name: CAXAMBAS, LLC

Current Principal Place of Business:

ATTN: JOSEPH ENGLISH
2075 W FIEST ST STE 300
FORT MYERS, FL 33901

New Principal Place of Business:

ATTN: JOSEPH ENGLISH
5249 SUMMERLIN COMMONS BLVD., SUITE 100
FORT MYERS, FL 33907

Current Mailing Address:

P.O. BOX 60497
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 65-6097102 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROBERTS, JUDY R
ATTN: JOSEPH ENGLISH
2075 W FIRST ST STE 300
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

ROBERTS, JUDY R
ATTN: JOSEPH ENGLISH
5249 SUMMERLIN COMMONS BLVD., SUITE 100
FORT MYERS, FL 33907 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: _____ 04/07/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: ROBERTS, JUDY R
Address: ATTN: JOSEPH ENGLISH 2075 W 1ST ST 300
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ROBERTS, JUDY R
Address: P. O. BOX 60497
City-St-Zip: FORT MYERS, FL 33906

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: JUDY R. ROBERTS MGR 04/07/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date