2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 03, 2005
Secretary of State

DOCUMENT# L03000027098

Entity Name: CAMP EXTREME TOURS, LLC

Current Principal Place of Business:

1908 TY TY CT
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1908 TY TY CT
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 32-0086048 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HART, DEREK E
1908 TY TY CT
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HART, DEREK E
Address: 1650 FOLKSTONE ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM ( ) Delete
Name: HART, DOROTHY
Address: 1908 TY TY CT
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM ( ) Delete
Name: HART, GERALD
Address: 1908 TY TY CT
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DEREK E. HART MGR 07/03/2005

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