

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000037400

Entity Name: CAMSHADE, LLC

FILED
Apr 24, 2007
Secretary of State

Current Principal Place of Business:

20937 SAINT ANDREWS BLVD.
SUITE 21
BOCA RATON, FL 33433

New Principal Place of Business:

2549 NW 31ST STREET
BOCA RATON, FL 33434

Current Mailing Address:

P.O. BOX 880609
BOCA RATON, FL 33488

New Mailing Address:

2549 NW 31ST STREET
BOCA RATON, FL 33434

FEI Number: 20-1140241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKOLNIK, RANDALL K
20937 SAINT ANDREWS BLVD.
STE 212
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

SKOLNIK, RANDALL K
2549 NW 31ST STREET
BOCA RATON, FL 33434 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: RANDALL K. SKOLNIK

04/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SKJELLERUP, JOHAN
Address: 16312 BRAEBURN RIDGE TRAIL
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGR () Delete
Name: SKOLNIK, RANDALL K
Address: 20937 SAINT ANDREWS BLVD., SUITE 21
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: SKOLNIK, RANDALL K
Address: 2549 NW 31ST STREET
City-St-Zip: BOCA RATON, FL 33434

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: RANDALL K. SKOLNIK

MGR

04/24/2007

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