

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070351

Entity Name: CANAM ASSOCIATES, LLC

FILED  
Apr 01, 2008  
Secretary of State

## Current Principal Place of Business:

205 HICKORY STREET  
FREEPORT, FL 32439

## New Principal Place of Business:

205 HICKORY STREET  
FREEPORT, FL 32439 US

## Current Mailing Address:

205 HICKORY STREET  
FREEPORT, FL 32439

## New Mailing Address:

205 HICKORY STREET  
FREEPORT, FL 32439 US

FEI Number: 20-1666250

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HELMICH, KEVIN M ESQUIRE  
4481 LEGENDARY DRIVE  
SUITE 200  
DESTIN, FL 32541 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: COTE, CHANTALE  
Address: 205 HICKORY STREET  
City-St-Zip: FREEPORT, FL 32439

Title: MGR ( ) Delete  
Name: SETON, BOB  
Address: 896 SHORE DRIVE  
City-St-Zip: DESTIN, FL 32550

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: COTE, CHANTALE  
Address: 205 HICKORY STREET  
City-St-Zip: FREEPORT, FL 32439 US

Title: MGR (X) Change ( ) Addition  
Name: SETON, BOB  
Address: 896 SHORE DRIVE  
City-St-Zip: DESTIN, FL 32550 US

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: CHANTALE COTE

MGR

04/01/2008

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