

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000759

FILED
Feb 04, 2009
Secretary of State

Entity Name: CAMPO AMADEN, LLC

Current Principal Place of Business:

324 S. FALKENBURG RD
TAMPA, FL 33619 US

New Principal Place of Business:

Current Mailing Address:

324 S. FALKENBURG RD
TAMPA, FL 33619 US

New Mailing Address:

FEI Number: 20-2088099 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPO, DAVID E
324 S. FALKENBURG RD
TAMPA, FL 33619 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: CAMPO, DAVID E
Address: 324 S. FALKENBURG RD
City-St-Zip: TAMPA, FL 33619 US

Title: MGR () Delete
Name: WIGGINS, SCOTT
Address: 324 S FALKENBURG RD
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES:

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 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: DAVID CAMPO MGR 02/04/2009

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