

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008028

Entity Name: CAMZC, LLC

FILED  
Apr 18, 2006  
Secretary of State

**Current Principal Place of Business:**

1915 AIRPORT BLVD.  
MELBOURNE, FL 32941

**New Principal Place of Business:**

1905 AIRPORT BLVD.  
MELBOURNE, FL 32941

**Current Mailing Address:**

1915 AIRPORT BLVD.  
MELBOURNE, FL 32941

**New Mailing Address:**

1905 AIRPORT BLVD.  
MELBOURNE, FL 32941

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LARKIN, DAVID G  
1900 S. HICKORY STREET, SUITE A  
FALLACE & LARKIN, L.C.  
MELBOURNE, FL 32901 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: MGRM ( ) Delete  
Name: FISCHER, MICHAEL R  
Address: 1915 AIRPORT BLVD.  
City-St-Zip: MELBOURNE, FL 32941

Title: MGRM ( ) Delete  
Name: MCGANN, STEVEN  
Address: 1915 AIRPORT BLVD.  
City-St-Zip: MELBOURNE, FL 32941

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: FISCHER, MICHAEL R  
Address: 1905 AIRPORT BLVD.  
City-St-Zip: MELBOURNE, FL 32941

Title: MGRM (X) Change ( ) Addition  
Name: MCGANN, STEVEN  
Address: 1905 AIRPORT BLVD.  
City-St-Zip: MELBOURNE, FL 32941

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL FISCHER

MGMR

04/18/2006

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