2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000065038

1. Entity Name EL CAMPO, LLC



FILED Apr 30, 2007 08:00 AM Secretary of State

Principal Place of Business

119 SINCLAIR STREET, S.W. PORT CHARLOTTE, FL 33952

Mailing Address

119 SINCLAIR STREET, S.W. PORT CHARLOTTE, FL 33952



DO NOT WRITE IN THIS SPACE

02132007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-4570730

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CASANOVA, LUIS A 119 SINCLAIR STREET, S.W. PORT CHARLOTTE, FL 33952

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SIGNATURE.	Signature, typed or printed name of registered agent and little if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
SIGNATUR	-		
	ove named entity submits this statement for the purpose of chang gations of registered agent.	ling its registered office or registered agent, or bot	n, in the State of Florida. I am familiar with, and accept

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGR	
NAME	CASANOVA, LUIS A	
STREET ADDRESS	119 SINCLAIR STREET, S.W.	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33952	
TITLE	MGR	
NAME	CASANOVA, ENA C	
STREET ADDRESS	119 SINCLAIR STREET, S.W.	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33952	
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11. I hereby certify that the information supplied with this flying does not qualify for the exemptions contained in Chapter 119, Florida Statules. I further certify that the information indicated on this report is true and accurate and that my 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 as the receiver or truege empowered to execute this report as required by Chapter 608, Florida Statules.

SIGNATURE

ON PRINTED HAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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