## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000102331

Entity Name: PAMCAM LLC

FILED Jan 08, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5965 TARPON GARDENS CIRCLE, UNIT 101 5965 TARPON GARDENS CIRCLE CAPE CORAL, FL 33914

**UNIT 101** 

CAPE CORAL, FL 33914

**Current Mailing Address: New Mailing Address:** 

5965 TARPON GARDENS CIRCLE, UNIT 101 5965 TARPON GARDENS CIRCLE CAPE CORAL, FL 33914

**UNIT 101** 

CAPE CORAL, FL 33914

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CAGLE, PETER B 6701 SÚNSET DRIVE #112 MIAMI, FL 33143

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:

Name:

Electronic Signature of Registered Agent Date

Name:

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete Title: () Change () Addition

DONALDSON, EDWARD A Address: 5965 TARPON GARDENS CIRCLE, UNIT 101 Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip:

Title: MGRM ( ) Delete Title: () Change () Addition Name: DONALDSON, PASCHA Name:

Address: 5965 TARPON GARDENS CIRCLE, UNIT 101 Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip:

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: EDWARD A. DONALDSON **MGRM** 01/08/2006