

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016324

Entity Name: CAMJOR, LLC

FILED
Aug 08, 2008
Secretary of State

Current Principal Place of Business:

1830 NEWFOUND HARBOR DRIVE
MERRITT ISLAND, FL 32952 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 540009
MERRITT ISLAND, FL 329540009 US

New Mailing Address:

1830 NEWFOUND HARBOR DRIVE
MERRITT ISLAND, FL 32952 US

FEI Number: 20-4304164 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MICHAELS, SEAN
1830 NEWFOUND HARBOR DRIVE
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

SEAN, MICHAELS
1830 NEWFOUND HARBOR DRIVE
MERRITT ISLAND, FL 32952 US

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: SEAN MICHAELS

08/08/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MICHAELS, DONNA M
Address: P.O. BOX 540009
City-St-Zip: MERRITT ISLAND, FL 329540009 US

Title: MGRM () Delete
Name: MICHAELS, SEAN
Address: P.O. BOX 540009
City-St-Zip: MERRITT ISLAND, FL 329540009 US

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: SEAN MICHAELS

MGRM

08/08/2008

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