

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 06, 2008 08:00 A
Secretary of State

DOCUMENT # L06000109295 1. Entity Name CANDEGO, LLC	
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Principal Place of Business 83 CEDAR STREET SAINT AUGUSTINE, FL 32084 US	Mailing Address 83 CEDAR STREET SAINT AUGUSTINE, FL 32084 US
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DO NOT WRITE IN THIS SPACE



03042008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5892043	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**DAVID, WATKINSON
83 CEDAR STREET
SAINT AUGUSTINE, FL 32084**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

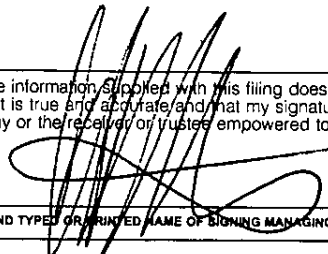
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WATKINSON, DAVID 83 CEDAR STREET SAINT AUGUSTINE, FL 32084
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARIE, WATKINSON 83 CEDAR STREET SAINT AUGUSTINE, FL 32084
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03/21/08-80021-020 138.75

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **3/4/08 901 824 2100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #