2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 07, 2008
Secretary of State

DOCUMENT# L06000119173

Entity Name: CAMWAY, LLC.

Current Principal Place of Business:

1207 &1211 ALTAMONTE DR.
ALTAMONTE SPRINGS, FL 32711 US

New Principal Place of Business:

1207 &1211 ALTAMONTE DR.
ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address:

PMB 354 931
NORTH STATE RD. 434 STE. 1201
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 20-8057035 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARQUES, WAYNE
PMB 354 931 NORTH STATE RD. 434
STE 1201
ALTAMONTE SPRINGS, FL 32714 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: MARQUES, WAYNE
Address: PMB 354 931 N. STATE RD. 434 STE 1201
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: MGRM ( ) Delete
Name: MARQUES, CHRISTOPHER A
Address: PMB 354 931 N. STATE RD. 434 STE 1201
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 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: WAYNE MARQUES MGRM 03/07/2008

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