

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000064007

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: CAM SQUARE LLC

**Current Principal Place of Business:**

1455 BLUE POINT AVENUE  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

1455 BLUE POINT AVENUE  
NAPLES, FL 34102

**New Mailing Address:**

FEI Number: 74-3218170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KLINGENBERG, MARTIN F  
1455 BLUE POINT AVENUE  
NAPLES, FL 34102 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: MGR ( ) Delete  
Name: KLINGENBERG, MARTIN F  
Address: 1455 BLUE POINT AVENUE  
City-St-Zip: NAPLES, FL 34102

Title: MGR ( ) Delete  
Name: KUTILOVA, HANA  
Address: 3031/1 MADROVA ST.  
City-St-Zip: PRAGUE 4, CZ 140 00 CZ

**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: MARTIN F. KLINGENBERG

MGR

01/07/2008

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