

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076623

Entity Name: A&M SPECIALTIES "LLC"

FILED  
Mar 31, 2008  
Secretary of State

**Current Principal Place of Business:**

1670 MUSCOGEE RD.  
CANTONMENT, FL 32533

**New Principal Place of Business:**

**Current Mailing Address:**

1670 MUSCOGEE RD.  
CANTONMENT, FL 32533

**New Mailing Address:**

FEI Number: 32-0210482

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DELAROSA, MICHAEL R  
1670 MUSCOGEE RD.  
CANTONMENT, FL 32533 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: DELAROSA, MICHAEL R  
Address: 1670 MUSCOGEE RD.  
City-St-Zip: CANTONMENT, FL 32533

Title: MGRM ( ) Delete  
Name: ROJAS, ALEJANDRO J  
Address: 183 OVER LOOK DR.  
City-St-Zip: PENSACOLA, FL 32503

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: MADDEN, ROBERT JR.  
Address: 6561 MEMPHIS AVE.  
City-St-Zip: PENSACOLA, FL 32526

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: ROBERT MADDEN

MGRM

03/31/2008

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