

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000098784

Entity Name: C.P.A.M., LLC

FILED
Feb 16, 2010
Secretary of State

Current Principal Place of Business:

513 US HIGHWAY ONE
209
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

513 US HIGHWAY ONE
209
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 26-3570448 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WADDINGTON, RICHARD
513 US HIGHWAY ONE
209
NORTH PALM BEACH, FL 33408 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
Name: ILLIEN, PATRICK
Address: 513 US HIGHWAY ONE, #209
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: MGR
Name: ILLIEN, CLAUDINE
Address: 513 US HIGHWAY ONE, #209
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: MGR
Name: ILLIEN, MATTHIEU
Address: 513 US HIGHWAY ONE, #209
City-St-Zip: NORTH PALM BEACH, FL 33408 US

Title: MGR
Name: ILLIEN, ALEXANDRE
Address: 513 US HIGHWAY ONE, #209
City-St-Zip: NORTH PALM BEACH, FL 33408 US

I hereby 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: PATRICK ILLIEN

MGR

02/16/2010

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