2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M03000000977

1. Entity Name

ARAMARK FHC CAMPUS SERVICES, LLC



FILED
May 03, 2007 08:00 A
Secretary of State

Principal Place of Business

ARAMARK TOWER 1101 MARKET STREET PHILADELPHIA, PA 19107 Mailing Address

ARAMARK TOWER 1101 MARKET STREET PHILADELPHIA, PA 19107



04292007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	· - ··	Applied For
<u>85-0485370</u>		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

the obligations of registered agent.

SIGNATURE:

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4 30 2007

215-238-3000

Daytine Phone #

SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
Fi D	iling Fee is \$50.00 ue by May 1, 2007	(NOTE: nogacined region agricular (equired when (streams))	LATE	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARAMARK FHC, LLC 1101 MARKET STREET PHILADELPHIA, PA 19107		U00000760137	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			05/24/07-80070-013 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, IN	IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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.				

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

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE