ANNUAL REPORT 1999  FILING FEE \$ Annual Report \$100.00 + \$88.75 Corporation S \$ 188.75  Make Check Payable To: FLORIDA DEPARTN  1. Name and Mailing Address of Limited Liability Company  CAM OF ILLINOIS, LLC P.O. BOX 861 SOUTH ROXANA IL 62087  2. Principal Place of Business  Suite, Apt. #, etc  City & State  City & State  City & State  City & State  Country  7. Name and Address of Current Registered Agent  C-T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the its registered diffice or registered agent, or both, in the State of Florida Such change we as registered agent, and accept the obligations  SIGNATURE  Plagstand Agent Accept and Appendixment in the III Registered Agents  In Title Managing Members/Managers  BUMGRM BRYANT, WILLIAM S  1705 COR	Ountry  8. Name Street Address		99 APR I	NE TRAI: L 62087  3a. State of Form IL  6. Certificate of S8.75 Additional F	L,  rmalion  Applied For  Not Applicable  Status Desired		
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Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  7. Name and Address of Current Registered Agent  C-T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the list registered office or registered agent, or both, in the State of Florida. Such change was registered agent, and accept the obligations  SIGNATURE  Florida Country  Florida Statutes, the list registered agent, and accept the obligations  BL  MGRM BRYANT, WILLIAM S  1705 COR	Name Street Address	02/25/19 4. FEI Number 37-13595 5. Date of Last Rep 03/19/19 3. Name and Address of	97 75 oort 98	6. Certificate of	Applied For  Not Applicable  Status Desired		
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MGRM BRYANT, WILLIAM S 1705 COR	as authorized by affirm	ed liability company submative vote of a majority o	FL nuts this statem				
	Business Street Address		City, State and Zip Code				
	1705 CORDEL CT		GODFREY IL				
MGRM FARRELL, BYRON L #1 LOCK	#1 LOCKHAVEN MANOR			GODFREY IL			
	4-11		Дитидия -04/16 ****1	99429 3/99011 88.75 *	\$\ 20 06001 ***188.75		
11 I do hereby certify that the information supplied with this filing does not qualify for the indicated on this annual report is true and accurate and that my signature shall have limited liability company or the receiver or trustee empowered to execute this report a attachment with an address.  SIGNATURE:  SIGNATUR	the same legal effect a	as if made under oath; th	al I am a mana,	ging member or i	manager of the		