

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010951

Entity Name: ANSUCASA, LLC

FILED
Feb 11, 2005
Secretary of State

Current Principal Place of Business:

C/O GINO L. CANTELE
4286 NEWPORT DRIVE UNIT 6
HERNANDO BEACH, FL 34607

Current Mailing Address:

C/O GINO L. CANTELE
4286 NEWPORT DRIVE UNIT 6
HERNANDO BEACH, FL 34607

New Principal Place of Business:

C/O AUDREY H. CANTELE
4286 NEWPORT DRIVE UNIT 6
HERNANDO BEACH, FL 34607

New Mailing Address:

C/O AUDREY H. CANTELE
4286 NEWPORT DRIVE UNIT 6
HERNANDO BEACH, FL 34607

FEI Number: 32-1262747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGLIS, JOHN S ESQ.
101 E. KENNEDY BLVD.
SUITE 2800
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

GONZALES, LARRY J ESQ.
2655 MCCORMICK DR.
SUITE 212
CLEARWATER, FL 33759 US

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: LARRY J. GONZALES

02/11/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: CANTELE, GINO L
Address: 4286 NEWPORT DRIVE UNIT 6
City-St-Zip: HERNANDO BEACH, FL 34607

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CANTELE, AUDREY H
Address: 4286 NEWPORT DRIVE UNIT 6
City-St-Zip: HERNANDO BEACH, FL 34607

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: AUDREY H.CANTELE

MGR

02/11/2005

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