

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010951

Entity Name: ANSUCASA, LLC

FILED  
Jan 06, 2011  
Secretary of State

**Current Principal Place of Business:**

506 FAITH TERRACE  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

506 FAITH TERRACE  
MAITLAND, FL 32751

**New Mailing Address:**

FEI Number: 14-1986385

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COVERSE, ANN C  
506 FAITH TERRACE  
MAITLAND, FL 32751 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: CONVERSE, ANN C  
Address: 506 FAITH TERRACE  
City-St-Zip: MAITLAND, FL 32751

Title: MGRM  
Name: BELTRAN, SUSAN J  
Address: 506 FAITH TERRACE  
City-St-Zip: MAITLAND, FL 32751

Title: MGRM  
Name: CHESTNUT, SANDRA J  
Address: 506 FAITH TERRACE  
City-St-Zip: MAITLAND, FL 32751

Title: MGRM  
Name: SIANO, CATHY C  
Address: 506 FAITH TERRACE  
City-St-Zip: MAITLAND, FL 32751

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: ANN C CONVERSE

MGR

01/06/2011

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