

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038294

FILED
Jan 23, 2009
Secretary of State

Entity Name: CASA AMICO, LLC

Current Principal Place of Business:

18 LAUREL ROAD
NEW CITY, NY 10956

New Principal Place of Business:

Current Mailing Address:

18 LAUREL ROAD
NEW CITY, NY 10956

New Mailing Address:

FEI Number: 52-2441371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAMER, CHARLES W
1411 EDGEWATER DRIVE, STE. 200
ORLANDO, FL 32804 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: MGRM () Delete
Name: PELATTI, ROSEMARIE
Address: 18 LAUREL ROAD
City-St-Zip: NEW CITY, NY 10950

Title: MGRM () Delete
Name: CICCONE, KAREN
Address: 18 LAUREL ROAD
City-St-Zip: NEW CITY, NY 10950

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: KAREN CICCONE

MS.

01/23/2009

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