

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000092516

**Entity Name:** CASEY KEY BAY HOUSE LLC

**Current Principal Place of Business:**

400 CASEY KEY ROAD  
NOKOMIS, FL 34275

**Current Mailing Address:**

409 ILLINOIS AVE.  
#1-D  
ST. CHARLES, IL 60174 US

**FEI Number:** 46-0895186

**Certificate of Status Desired:** No

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

KOHL, LAUREN P  
414 S. TAMIAMI TRAIL  
OSPREY, FL 34229 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name RASMUSSEN, CHRISTINE A  
Address 409 ILLINOIS AVE  
SUITE 1-D  
City-State-Zip: ST. CHARLES IL 60174

Title MGRM  
Name RASMUSSEN, JUDITH A  
Address 15436 VILLAGE WOODS DR.  
City-State-Zip: EDEN PRAIRIE MN 55437

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHRISTINE RASMUSSEN

**MANAGER**

**07/05/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date