

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1500008227

Entity Name: HSRE-ASL CASSELBERRY TRS, LLC

Current Principal Place of Business:

212 S CENTRAL AVE
ST LOUIS, MO 63105

Current Mailing Address:

212 S CENTRAL AVE
ST LOUIS, MO 63105

FEI Number: 81-0719266

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MBR
Name HSRE-ASL CASSELBERRY, LLC
Address 212 S CENTRAL AVE
City-State-Zip: ST LOUIS MO 63105

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: R. SCOTT WALTER

GLOBAL CONTROLLER

04/29/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date