

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002308

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: CAS ADVISORY MANAGEMENT, LLC

## Current Principal Place of Business:

3066 TAMIAMI TRAIL NORTH  
#202  
NAPLES, FL 34103 US

## New Principal Place of Business:

## Current Mailing Address:

3066 TAMIAMI TRAIL NORTH  
#202  
NAPLES, FL 34103 US

## New Mailing Address:

FEI Number: 65-1082683      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KANTOR, KIM CICCARELLI  
3066 TAMIAMI TRAIL NORTH  
STE 202  
NAPLES, FL 34103 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 ( ) Delete  
Name: KANTOR, KIM CICCARELLI  
Address: 285 GRANDE WAY, UNIT 1202  
City-St-Zip: NAPLES, FL 34110

Title: MGR ( ) Delete  
Name: RAPPS, JILL C  
Address: 2102 IMPERIAL GOLF COURSE BLVD.  
City-St-Zip: NAPLES, FL 34110

## 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: KIM CICCARELLI KANTOR

MGR

01/15/2009

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