2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# L01000019290

Entity Name: CASEY KEY MANAGEMENT, L.L.C.

Current Principal Place of Business:

226 SOUTH MERAMEC
SUITE 100
CLAYTON, MO 63105 US

New Principal Place of Business:

Current Mailing Address:

226 SOUTH MERAMEC
SUITE 100
CLAYTON, MO 63105 US

New Mailing Address:

FEI Number: 43-1944262 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEXISNEXIS DOCUMENT SOLUTIONS, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:	FARRELL, JOE	
Address:	3260 CASEY KEY RD	
City-St-Zip:	NOKOMIS, FL 34275	
Title:	MGRM	( ) Delete
Name:	THE MICHAEL LITZ REV, LIVING TRUST	
Address:	226 SOUTH MERAMEC SUITE 100	
City-St-Zip:	CLAYTON, MO 63105	
Title:	MGRM	( ) Delete
Name:	THE MICHAEL B FOX RE, V LIVING TRUST	
Address:	226 SOUTH MERAMEC SUITE 100	
City-St-Zip:	CLAYTON, MO 63105	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: THE MICHAEL LITZ REV LIVING TRUST MGRM 01/11/2008

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