

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 26, 2006 8:00 am
Secretary of State

04-28-2006 90021 014 ****50.00

DOCUMENT # L01000020557		
1. Entity Name CHASCO APARTMENTS, LLC		
Principal Place of Business 5005 INTERBAY BOULEVARD TAMPA, FL 33611 US		Mailing Address 5005 INTERBAY BOULEVARD TAMPA, FL 33611 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent EVERETT, ANTHONY 5005 INTERBAY BOULEVARD TAMPA, FL 33611		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable		
NOTE: Registered Agent signature required when reappointing		
DATE _____		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR INTERNATIONAL REALTY INC 406 N ST MARY'S ST, SUITE 850 SAN ANTONIO, TX 78205	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR CARAWAY, JR, HUGH L 406 N. ST MARY'S ST, SUITE 850 SAN ANTONIO, TX 78205	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DO NOT WRITE IN THIS SPACE	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.		
SIGNATURE: <u>ANTONIO TALAMANTE</u> (CONTROLLER)		522-06 210 281-1460
SIGNATURE AND TYPED OR PRINTED NAME OF BRANCH MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date

30009040



04202006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
58-2663019

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required