2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 04, 2008
Secretary of State

DOCUMENT# L02000014980

Entity Name: CASTSCAPES, LLC

Current Principal Place of Business:

539 OLIVE ST.
SOUTH DAYTONA, FL 32117 US

New Principal Place of Business:

539 OLIVE ST.
SOUTH DAYTONA, FL 32119 US

Current Mailing Address:

539 OLIVE ST.
SOUTH DAYTONA, FL 32117 US

New Mailing Address:

539 OLIVE ST.
SOUTH DAYTONA, FL 32119 US

FEI Number: 04-3679182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TAYLOR, GARRETT L
539 OLIVE ST.
SOUTH DAYTONA, FL 32117 US

Name and Address of New Registered Agent:

TAYLOR, GARRETT L
539 OLIVE ST.
SOUTH DAYTONA, FL 32119 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: GARRETT TAYLOR 09/04/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: TAYLOR, GARRETT L
Address: 539 OLIVE ST.
City-St-Zip: SOUTH DAYTONA, FL 32117 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: TAYLOR, GARRETT L
Address: 539 OLIVE ST.
City-St-Zip: SOUTH DAYTONA, FL 32119 US

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: GARRETT TAYLOR MGRM 09/04/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date