

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000027817

Entity Name: LAS LOCAS, LLC

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5287 NEW KINGS ROAD  
ATTN: JOHN T. CASSIDY, SR.  
JACKSONVILLE, FL 32209

**New Principal Place of Business:**

**Current Mailing Address:**

5287 NEW KINGS ROAD  
ATTN: JOHN T. CASSIDY, SR.  
JACKSONVILLE, FL 32209

**New Mailing Address:**

FEI Number: 13-4235530

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

YONG, FRANK J P.A.  
4570 ST. JOHNS AVE., STE 1A  
JACKSONVILLE, FL 32210 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  
Name: CASSIDY, JOHN T SR  
Address: 5287 NEW KINGS ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

Title: MGRM  
Name: CASSIDY, HEATHER F  
Address: 3855 MCGIRTS BLVD.  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby 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: JOHN T CASSIDY SR

MGR

04/27/2011

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