


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 22, 2007 08:00 A
Secretary of State

DOCUMENT # L03000044748		
1. Entity Name CASSELS HOLDING COMPANY, LLC		
Principal Place of Business 338 WESTWINDS CIRCLE PALM HARBOR, FL 34683	Mailing Address 338 WESTWINDS CIRCLE PALM HARBOR, FL 34683	



05172007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-2135583	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**SMITH, JOANN E
338 WESTWINDS CIRCLE
PALM HARBOR, FL 34683**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SMITH, WAYNE A 338 WESTWINDS CIRCLE PALM HARBOR, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SMITH, JOANN E 338 WESTWINDS CIRCLE PALM HARBOR, FL 34683
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05/31/07-80019-004 55.00

**DO NOT WRITE
IN THIS SPACE**

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 608, Florida Statutes.

SIGNATURE: *JoAnn E Smith* **5-11-2007 (627) 985-9**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #