

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000009094

Entity Name: CASE PROPERTIES, LLC

**FILED**  
**Sep 21, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5697 HAWKS CREEK TRAIL  
PLANT CITY, FL 33567

**New Principal Place of Business:**

**Current Mailing Address:**

5697 HAWKS CREEK TRAIL  
PLANT CITY, FL 33567

**New Mailing Address:**

P.O. BOX 1114  
LITHIA, FL 33547

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

WATSON, JILL  
5697 HAWKS CREEK TRAIL  
PLANT CITY, FL 33567 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: JILL WATSON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WATSON, RICHARD D  
Address: 5697 HAWKS CREEK TRAIL  
City-St-Zip: PLANT CITY, FL 33567

Title: MGRM  
Name: WATSON, JILL D  
Address: 5697 HAWKS CREEK TRAIL  
City-St-Zip: PLANT CITY, FL 33567

Title: MGRM  
Name: WATSON, CASE D  
Address: 5697 HAWKS CREEK TRAIL  
City-St-Zip: PLANT CITY, FL 33567

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: JILL WATSON

MGRM

09/21/2010

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