


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 02, 2006 8:00 am
Secretary of State

06-02-2006 90109 036 ****50.00

DOCUMENT # L05000019153

1. Entity Name
J & J CASEY KEY, LLC



Principal Place of Business
**4098 LAS PALMAS WAY
 SARASOTA, FL 34238**

Mailing Address
**4098 LAS PALMAS WAY
 SARASOTA, FL 34238**

20046965



2. Principal Place of Business
1939 LAKE CHARLES DRIVE

3. Mailing Address
1939 LAKE CHARLES DRIVE

Suite, Apt. #, etc.

05242006 Chg-LLC CR2E083 (11/05)

City & State
VERNON HILLS, IL

City & State
VERNON HILLS, IL

Zip **60061** Country **LAKZ** Zip **60061** Country **LAKZ**

4. FEI Number
55-0895211

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent

**SILBERSTEIN, DAVID M
 720 SOUTH ORANGE AVENUE
 SARASOTA, FL 34236**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 6, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WONG, JONATHAN 4098 LAS PALMAS WAY SARASOTA, FL 34238 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1939 LAKE CHARLES DRIVE VERNON HILLS IL 60061
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WONG, JEFFREY 4098 LAS PALMAS WAY SARASOTA, FL 34238 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1939 LAKE CHARLES DRIVE VERNON HILLS IL 60061
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: _____ **5/30/06** **847-816-0606**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #