2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092987

Entity Name: CAO PROPERTIES, LLC

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13219 BYRD DRIVE 13219 BYRD DRIVE SUITE B ODESSA, FL 33556

ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

 13219 BYRD DRIVE
 13219 BYRD DRIVE

 SUITE B
 ODESSA, FL 33556

 ODESSA, FL 33556

FEI Number: 20-3777140 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOLZBERGER, DUSTIN C
13219 BYRD DRIVE
SUITE B
ODESSA, FL 33556 US
HOLZBERGER, DUSTIN C
13219 BYRD DRIVE
ODESSA, FL 33556 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: 04/08/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: PRES () Delete Title: () Change () Addition

 Name:
 HOLZBERGER, DUSTIN C
 Name:

 Address:
 20320 MOSS BRANCH COURT
 Address:

 City-St-Zip:
 LUTZ, FL 33558 US
 City-St-Zip:

 Title:
 VP
 () Delete
 Title:
 VP
 (X) Change () Addition

 Name:
 SANGUEDOLCE, MICHELE M
 Name:
 HOLZBERGER, MICHELE M

 Address:
 20320 MOSS BRANCH COURT
 Address:
 20320 MOSS BRANCH COURT

City-St-Zip: LUTZ, FL 33558 US City-St-Zip: LUTZ, FL 33558 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: ANSLEY OLINGER MNGR 04/08/2009