

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000099805

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Entity Name:** CASCADE PROPERTIES LLC

**Current Principal Place of Business:**

6617 ASHBURN RD  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

8330 CURRENCY DR  
BLDG # 5  
WEST PALM BEACH, FL 33404

**Current Mailing Address:**

6617 ASHBURN RD  
LAKE WORTH, FL 33467

**New Mailing Address:**

2315 MAIDENHAIR WAY  
SAN RAMON, CA 94582

**FEI Number:** 55-0895992

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHILLARIGE, SRIVENUGOPAL  
6617 ASHBURN RD  
LAKE WORTH, FL 33467 US

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

CHILLARIGE, SRIVENUGOPAL  
8330 CURRENCY DR  
BLDG # 5  
WEST PALM BEACH, FL 33404 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: SRIVENUGOPAL CHILLARIGE

04/15/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CHILLARIGE, SAILAJA  
Address: 2315 MAIDENHAIR WAY  
City-St-Zip: SAN RAMON, CA 94582

Title: MGRM  
Name: CHILLARIGE, SRIVENUGOPAL  
Address: 2315 MAIDENHAIR WAY  
City-St-Zip: SAN RAMON, CA 94582

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: SRIVENUGOPAL CHILLARIGE

DIR.

04/15/2012

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