

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000115976

FILED  
Feb 16, 2009  
Secretary of State

Entity Name: C & G STRASSER MANAGEMENT, LLC

**Current Principal Place of Business:**

1030 NORTH US 1  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

**Current Mailing Address:**

1030 NORTH US 1  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 20-3880821

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STRASSE, CHARLES L  
1042 N W HWY 1  
ORMOND BEACH, FL 32124 US

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

STRASSER, CHARLES L  
1042 N W HWY 1  
ORMOND BEACH, FL 32124 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: CHARLES L.STRASSER

02/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STRASSER, CHARLES L  
Address: 1030 NORTH US 1  
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGR ( ) Delete  
Name: STRASSER, GINA T  
Address: 1030 NORTH US 1  
City-St-Zip: ORMOND BEACH, FL 32174 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES L.STRASSER

MGR

02/16/2009

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