2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# L06000036489

Entity Name: THOMAS G. CASEY, LLC

Current Principal Place of Business:

4588 LONGLEAF LANE
SARASOTA, FL 34241

New Principal Place of Business:

4588 LONGLEAF LANE
SINGLE FAMILY HOME
SARASOTA, FL 34241

Current Mailing Address:

4588 LONGLEAF LANE
SARASOTA, FL 34241

New Mailing Address:

4588 LONGLEAF LANE
SINGLE FAMILY HOME
SARASOTA, FL 34241

FEI Number: 20-4701616 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASEY, CATHERINE A
4588 LONGLEAF LANE
SARASOTA, FL 34241 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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: CASEY, THOMAS G
Address: 4588 LONGLEAF LN
City-St-Zip: SARASOTA, FL 34241

Title: MGRM ( ) Delete
Name: CASEY, CATHERINE A
Address: 4588 LONGLEAF LN
City-St-Zip: SARASOTA, FL 34241

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: THOMAS G. CASEY MGR 01/15/2009

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