

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109979

Entity Name: CAC HOLDINGS, L.L.C.

FILED  
Jan 16, 2007  
Secretary of State

**Current Principal Place of Business:**

10706 115TH AVENUE NORTH  
LARGO, FL 33778

**New Principal Place of Business:**

**Current Mailing Address:**

10706 115TH AVENUE NORTH  
LARGO, FL 33778

**New Mailing Address:**

FEI Number: 02-0791300

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GASSMAN, ALAN S  
1245 COURT STREET, STE. 102  
CLEARWATER, FL 33756 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: PRES ( ) Change (X) Addition  
Name: HOLLSTROM, KATHLEEN S  
Address: 11444 SEMINOLE BLVD  
City-St-Zip: LARGO, FL 33778

Title: VP ( ) Change (X) Addition  
Name: DUNN, JOSEPH  
Address: 390 NINTH AVE NORTH  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TREA ( ) Change (X) Addition  
Name: HARDING, RANDOLPH C  
Address: 2326 US HWY 19 N  
City-St-Zip: HOLIDAY, FL 34691

Title: SEC ( ) Change (X) Addition  
Name: JONES, RODERICK C  
Address: 5500 NINTH STREET NORTH  
City-St-Zip: ST. PETERSBURG, FL 33703

Title: DIR ( ) Change (X) Addition  
Name: HOLLSTROM, GREGORY V  
Address: 11444 SEMINOLE BLVD  
City-St-Zip: LARGO, FL 33778

Title: DIR ( ) Change (X) Addition  
Name: JONES, DENNIS L  
Address: 5500 NINTH STREET NORTH  
City-St-Zip: ST. PETERSBURG, FL 33703

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN HOLLSTROM

PRES

01/16/2007

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