

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000001215

FILED
Apr 11, 2009
Secretary of State

Entity Name: CUSMANO PROPERTIES, LLC

Current Principal Place of Business:

206 N GOMEZ AVENUE
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

206 N GOMEZ AVENUE
TAMPA, FL 33609

New Mailing Address:

FEI Number: 20-8959294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUSMANO, JOSEPH
4224 WATER OAKS LANE
TAMPA, FL 33618 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: MGRM () Delete
Name: CUSMANO, JOE
Address: 4224 WATER OAKS LANE
City-St-Zip: TAMPA, FL 33618

Title: MGRM () Delete
Name: CUSMANO, PHILIP
Address: 7901 MEADOW CROFT PL
City-St-Zip: TAMPA, FL 33615

Title: MGRM () Delete
Name: CUSMANO, NELSON S
Address: 5702 RIVER TERRACE
City-St-Zip: TAMPA, FL 33604

Title: MGRM () Delete
Name: GRIFFIN, MARY ANN
Address: 1508 RIVER LANE
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES:

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

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

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: P. CUSMANO

MR.

04/11/2009

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