

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000011413

Entity Name: CAAJO, LLC

FILED  
Feb 19, 2008  
Secretary of State

**Current Principal Place of Business:**

12145 CYPRESS LANDING AVE  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

12145 CYPRESS LANDING AVE  
CLERMONT, FL 34711

**New Mailing Address:**

FEI Number: 20-8509679

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OPALESKI, CAROL  
12145 CYPRESS LANDING AVE  
CLERMONT, FL 34711 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: OPALESKI, CAROL A  
Address: 12145 CYPRESS LANDING AVE  
City-St-Zip: CLERMONT, FL 34711

Title: MGRM ( ) Delete  
Name: OPALESKI, ANDREW J  
Address: 12145 CYPRESS LANDING AVE  
City-St-Zip: CLERMONT, FL 34711

Title: MGRM ( ) Delete  
Name: MCCORMACK, ANGELA C  
Address: 510 ENGLISH LAKE DR  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM ( ) Delete  
Name: OPALESKI, CHAD J  
Address: 4606 NE JACKSONVILLE RD  
City-St-Zip: OCALA, FL 34479

**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: CAROL A OPALESKI

MGRM

02/19/2008

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