

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000109314

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** CASITA, LLC

**Current Principal Place of Business:**

221 NW 14TH AVE.  
CAPE CORAL, FL 33993

**New Principal Place of Business:**

221 NW 14TH AVE  
CAPE CORAL, FL 33993

**Current Mailing Address:**

P.O. BOX 100773  
CAPE CORAL, FL 33910

**New Mailing Address:**

**FEI Number:** 30-0446978      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HAHN, JUERGEN  
P.OBOX100773  
CAPE CORAL, FL 33910      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:** MGR  
**Name:** HAHN, JUERGEN  
**Address:** P OBOX 100773  
**City-St-Zip:** CAPE CORAL, FL 33910

**Title:** MGR  
**Name:** FISCHER, ALEXANDRA M  
**Address:** P OBOX 100773  
**City-St-Zip:** CAPE CORAL, FL 33910

**Title:** S  
**Name:** HAHN, JUERGEN  
**Address:** PO BOX 100773  
**City-St-Zip:** CAPE CORAL, FL 33910

**Title:** T  
**Name:** FISCHER, ALEXANDRA M  
**Address:** PO BOX 100773  
**City-St-Zip:** CAPE CORAL, FL 33910

I hereby 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:** JUERGEN HAHN

MGR

01/04/2011

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