

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT# L96000000072

1. Entity Name
CASACELESTE, L.C.



Principal Place of Business
**922582 N DAVENUE,
SEMINOLE, FL 33777**

Mailing Address
**1266 FIRST STREET, SUITE 8
SARASOTA, FL 34236**



01082004 No Chg-LLC

CR2E083(10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0633939

Applied For
☐ Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KISTLER, RICHARD L
1266 FIRST STREET
SUITE 8
SARASOTA, FL 34236**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when installing)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

U00000142308
04/30/04 80045-023 158.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	KISTLER, RICHARD L
STREET ADDRESS	1266 FIRST STREET
CITY - ST - ZIP	SARASOTA, FL 34236
TITLE	MEM
NAME	ROSNER, JAMES C
STREET ADDRESS	45 PROGRESS PARKWAY
CITY - ST - ZIP	MARYLAND HGTS, MO 63043
TITLE	MEM
NAME	SAENGER, LEO C
STREET ADDRESS	12412 POWERS COURT DR., STE 150
CITY - ST - ZIP	ST LOUIS, MO 63141
TITLE	MEM
NAME	NICKELL, TED A
STREET ADDRESS	3785 WINDBER BLVD
CITY - ST - ZIP	PALM HARBOR, FL 34685
TITLE	MEM
NAME	KASSICIEH, DANIEL V D O
STREET ADDRESS	16300 OAK CIRCLES
CITY - ST - ZIP	SARASOTA, FL 34232
TITLE	MEM
NAME	HOLLYD, BALL TRUST
STREET ADDRESS	45 PROGRESS PARKWAY
CITY - ST - ZIP	MARYLAND HGTS, MO 63043

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Richard L. Kistler
Richard L. Kistler 3/12/04 941/365-6194