

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L97000000328

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** CASA DE NINOS PROPERTIES, L.C.

**Current Principal Place of Business:**

2002 E. 4TH AVENUE  
TAMPA, FL 33605

**New Principal Place of Business:**

**Current Mailing Address:**

3214 W TACON ST  
TAMPA, FL 33629

**New Mailing Address:**

3214 W. TACON ST  
TAMPA, FL 33629

**FEI Number:** 59-3441773

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DECEMBER, CHRIS  
3214 W. TACON ST  
TAMPA, FL 33629 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  
Name: GAINES, STEPHANIE D  
Address: 3214 W. TACON ST.  
City-St-Zip: TAMPA, FL 33629

Title: MGRM  
Name: GAINES, RONALD  
Address: 3214 W. TACON ST.  
City-St-Zip: TAMPA, FL 33629

Title: MGRM  
Name: DECEMBER, CHRISTOPHER K  
Address: 2421 88TH AVE., NE  
City-St-Zip: CLYDE HILL, WA 98004

Title: MGRM  
Name: DECEMBER, STEPHANIE M  
Address: 2421 88TH AVE., NE  
City-St-Zip: CLYDE HILL, WA 98004

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:** STEPHANIE GAINES

MGRM

03/18/2010

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