2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L98000000731

1. Entity Name CASEY-MCNAB L.C.

FILED Mar 09, 2007 08:00 AM Secretary of State

Principal Place of Business

2152 SOUTH SHORE DRIVE ERIE, PA 16505

Mailing Address

1805 WEST 38TH STREET ERIE, PA 16508



02242007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 25-1813321 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MANAGING MEMBERS/MANAGERS

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

SIGNATURE Speci or brinted name of registered agent and title d applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	-
8. The above named entity submits this statement for the purpose of chan the obligations of registered agent	iging its registered office or registered agent, or both, in the St	ate of Florida. I am familiar with, and	accept
		·	

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
NAME STREET ADDRESS	MGR CASEY ASSET MANAGEMENT, LTD. 2152 SOUTH SHORE DRIVE
CITY ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP	ERIE. PA 16505
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SE-ZIP	
TITLE NAME STREET ADDRESS CITY STIZIP	
11. I hereby o	certify that the information supplied with this filling does not qualify for the ex

U00000660740 03/20/07-80012-020 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 PRINCED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Jes/07

Davime Proce #