


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2007 08:00 AM
Secretary of State

DOCUMENT # M04000004492 1. Entity Name CASVAK RIVER CLUB LLC	
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Principal Place of Business 191 WEST NATIONWIDE BOULEVARD STE. 200 COLUMBUS, OH 43215	Mailing Address 191 WEST NATIONWIDE BOULEVARD STE. 200 COLUMBUS, OH 43215
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DO NOT WRITE IN THIS SPACE



04182007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 03-0509273	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

BAXTER, MARY P
 401 NORTH CATTLEMEN ROAD STE. 108
 SARASOTA, FL 34232

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CASBEN LIMITED COMPANY 191 WEST NATIONWIDE BOULEVARD STE. 200 COLUMBUS, OH 43215
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05/30/07-80040-010 50.00

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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:  **Don M. Casto, III** 4-23-07 614-228-5331

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #