

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000003681

FILED
Jan 19, 2012
Secretary of State

Entity Name: CASCO PROFESSIONAL SERVICES, LLC

Current Principal Place of Business:

10877 WATSON ROAD
SAINT LOUIS, MO 63127

New Principal Place of Business:

Current Mailing Address:

10877 WATSON ROAD
SAINT LOUIS, MO 63127

New Mailing Address:

FEI Number: 45-2754203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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: BANDLE, WILLIAM JR.
Address: 10877 WATSON ROAD
City-St-Zip: SAINT LOUIS, MO 63127

Title: MGRM
Name: DOERING, PAUL
Address: 10877 WATSON ROAD
City-St-Zip: SAINT LOUIS, MO 63127

Title: MGRM
Name: GOVAIA, JAMES
Address: 10877 WATSON ROAD
City-St-Zip: SAINT LOUIS, MO 63127

Title: MGRM
Name: HUBER, PAUL
Address: 10877 WATSON ROAD
City-St-Zip: SAINT LOUIS, MO 63127

Title: MGRM
Name: SHAW, RALPH
Address: 10877 WATSON ROAD
City-St-Zip: SAINT LOUIS, MO 63127

Title: MGRM
Name: TEGETHOFF, JAMES
Address: 10877 WATSON ROAD
City-St-Zip: SAINT LOUIS, MO 63127

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: PAUL R. DOERING

MGRM

01/19/2012

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