

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026625

FILED
Apr 22, 2009
Secretary of State

Entity Name: ONE HUNDRED CENTRAL AVENUE, LLC

Current Principal Place of Business:

401 NORTH CATTLEMEN ROAD
SUITE 108
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

401 NORTH CATTLEMEN ROAD
SUITE 108
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 56-2425927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENE, ROBERT F
1301 - 6TH AVENUE WEST
SUITE 400
BRADENTON, FL 34205 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 () Delete
Name: VENTURE, CASTO-ZENITH LLC
Address: 401 N. CATTLEMEN ROAD, STE 108
City-St-Zip: SARASOTA, FL 34232

Title: MGRM () Delete
Name: CASTO SOUTHEAST LLC
Address: 191 WEST NATIONWIDE BOULEVARD SUITE 200
City-St-Zip: COLUMBUS, OH 43215

Title: MGRM () Delete
Name: ZENITH INSURANCE COMPANY
Address: 21255 CALIFA STREET
City-St-Zip: WOODLAND HILLS, CA 91367

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DON M CASTO, III MGR 04/22/2009

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