

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 153192

FILED  
May 14, 2002 8:00 AM  
Secretary of State

Entity Name: CASEY INTERPRISES AND INVESTMENTS, INC.

**Current Principal Place of Business:**

29 PINE SHORES RD  
DEFUNIAK SPRINGS, FL 32435 US

**New Principal Place of Business:**

**Current Mailing Address:**

29 PINE SHORES RD  
DEFUNIAK SPRINGS, FL 32435 US

**New Mailing Address:**

FEI Number: 59-0576178      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STANFIELD, CHRISTINA C  
29 PINE SHORES RD  
DEFUNIAK SPRINGS, FL 32435

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

BROWN, CHRISTINA C  
29 PINE SHORES RD  
DEFUNIAK SPRINGS, FL 32435

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: CHRISTINA C BROWN      05/14/2002  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: STANFIELD, CHRISTINA C  
Address: 29 PINE SHORE RD  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: STD ( ) Delete  
Name: BROWN, MICHAEL E  
Address: 29 PINE SHORES RD  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BROWN, CHRISTINA C  
Address: 29 PINE SHORES RD  
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL E BROWN      STD      05/14/2002  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date