

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F91902

Entity Name: CASUAL LINE CORP.

Current Principal Place of Business:

1065 E STORY RD.
WINTER GARDEN, FL 34787

Current Mailing Address:

1065 E STORY RD.
WINTER GARDEN, FL 34787

FEI Number: 59-2219394

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAGNUSON, JAMES A
9844 LAUREL DRIVE
WINDERMERE, FL 34786 US

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

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name FRANCES J CROFOOT
Address 8823 BAY HILL BLVD
City-State-Zip: ORLANDO FL 32811

Title VP, SECRETARY, TREASURER,
DIRECTOR
Name CROFOOT, KROY E
Address 9903 GIFFEN CT.
City-State-Zip: WINDERMERE FL 34786

Title VP, ASST. SECRETARY, DIRECTOR
Name MAGNUSON, JAMES A
Address 9844 LAUREL DRIVE
City-State-Zip: WINDERMERE FL 34786

I hereby 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 all other like empowered.

SIGNATURE: KROY E. CROFOOT

VICE PRESIDENT

04/25/2018

Electronic Signature of Signing Officer/Director Detail

Date