

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENTFLORIDA DEPARTMENT OF STATE  
Sandra B. Morley  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 460539

1. Corporation Name

CASEY'S, INC.

FILED  
97 APR 14 PM 2:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3386 Highway 17 North  
Yulee, FL 32097Post Office Box 1244  
Yulee, FL 32041

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

09-03-74

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City &amp; State

City &amp; State

59-1552101

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/S/D	CHARLES D. CASEY	3386 Highway 17 North	Yulee, FL 32097
			7000002149627--1 -04/21/97--01157--003 ***1410.00 ***1410.00
			7000002149627--1 -04/21/97--01157--004 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JAMES R. PITTS  
Route 3, Box 305  
Yulee, FL 32097

Name

CHARLES D. CASEY

Street Address (P.O. Box Number is No. Acceptable)

3386 Highway 17 North

Suite, Apt. #, Etc.

City

Yulee

State

FL

Zip Code

32097

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent*Charles D. Casey*

REGISTERED AGENT MUST SIGN

Date April 9, 1997

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐(See other side for information  
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: CHARLES D. CASEY

PRESIDENT 4/9/97 (904) 225-2328



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

April 10, 1997

CAPITAL CONNECTION, INC.  
P.O. BOX 10349  
TALLAHASSEE, FL 32302

SUBJECT: CASEY'S, INC.  
Ref. Number: 460539

We have received your document for CASEY'S, INC. and check(s) totaling \$1418.75. However, your check(s) and document are being returned for the following:

The name of the above listed entity is no longer available. Please file an amendment changing the name of this entity. The amendment filing fee is \$35.00.

If you have any questions concerning the filing of your document, please call (904) 487-6059.

Trevor Brumbley  
Document Specialist

Letter Number: 297A00018076

RECEIVED  
97 APR 14 AM 9:27  
DIVISION OF CORPORATION

File  
2nd

Corrected