FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPCRATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

488974 **DOCUMENT #**

(7)

DAN CASEY PAINTING CONTRACTOR, INC.

Principal Place of Business	
1337 S W MARTIN HIGHWAY #714	



1337 S W MARTIN HIGHWAY #714 PALM CITY FL 34990-3373		1337 SW MARTIN HW PALM CITY FL 34990 US				
					3. Date incorporated or Qualified 11/05/1975	3a. Date of Last Report 03/03/1995
· ·	ace cf Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-1666600	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	8	City & State			6. Election Campaign Financing	□ \$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation has liability for in	ntangible tax under s 199.032,
24	9. Name and Address of Curre	29	30		Florida Statutes	
	9. Name and Address of Com	ent Registered Agent	81	Name	10. Name and Address of New Ro	egistered Agent
CASEV	DANIEL R		"	Ivame		ļ
	W MARTIN HWY #714		82	Street Ad	dress (P.O. Box Number is Not Acceptable	e)
	TY FL 33490		83			
I ALM C	111 FE 33450		0.5	']		
			84	City		85 Zip Code
11. Pursuant t	o the provisions of Sections 607 050	12 and 607 1508 Florida Statute	ac the shave	Domod core	oration submits this statement for the purp	
e, 149.0101	ed agent, or both, in the State of Flo in, and accept the obligations of, Sec	noa. Odan Ghande was authorize	ear da mercion	poration's bo	oration submits this statement for the purp lard of directors. I hereby accept the appo	pose of changing its registered office introduced introduced agent. I am
SIGNATURE.	Signature, typod or printed name of registered age					
12.		nt and title if applicable (NO: ND DIRECTORS	TE: Registered Age	nt signature requi	red when reinstating:	DATE
Trile	P	DELETE	1. 1 TUTLE		ADDITIONS/CHANGES TO OFFICE	
NAME	CASEY, DANIEL R		1. 1 TITLE 1.2 NAME			Change Addition
STREET ADDRESS	1337 S W MARTIN HWY #7	14		T ADDRESS		
CITY - ST - ZIP	PI.M CITY FL	•	1.4 City - :			
TITLE	V	☐ DELETE	2 1 Title	51 - 211		Change Addition
NAME	CASEY, DANIEL R JR	-	2.2 NAME			Circulation Circulation
STREET ADDRESS	1337 S W MARTIN HWY #7	14	2.3 STREET	LYDODLGC		
CITY-ST-ZIP	PLM CITY FL	••	2.5 STREE			
TITLE	T	☐ DELE1E	3 1 TITLE	31-211		Change Addition
NAME	MUSSO, JOY C.	-	3 2 NAME			O-large Redution
STREET ADDRESS	1337 S W MARTIN HWY #7	14	1	T ADDRESS		
CITY-ST-ZIP	PALM CITY FL		3.4 CiTY - S			
TITLE		☐ DELETE	4. 1 TITLE			Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
DITY-ST-ZIP			4.4 CITY - S	iT-ZIP		
TITLE		☐ DELETE	5. 1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CiTY-S	T · ZIP		1
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6 4 CITY - S	T-ZIP		
14. I do hereby	certify that the information supplied	with this filing is voluntarily furnis	shed and doe	s not qualify	for the exemption stated in Section 119.0	7(3)(k) Florida Statutes I further

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if exampled, or on an attachment with an address.

SIGNATURE:

PED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4-2396 407-283-7843