## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 504580

(2)

CASE ENGINEERING, INC.

Principal Place of Business

1

Mailing Address
5301 GREAT OAK DR.
P.O. BOX 6039

## FILED May 06 1997 8:00am Secretary of State



P.O. BOX 6039 P.O. BOX				1 GREAT OAK DR. , BOX 6039 (ELAND FL 33807-6039					Date Incorporated or Qualified	3a. Date of Last Report <b>05/01/1996</b>				
B Dalantari	Dione of Division		1 22	Mailing Address					05/28/1976	<u> </u>	שו קו			
2. Principal Place of Business 21			26	2a. Mailing Address					<b>4.</b> FEI Number <b>59-1671697</b>	T Ippinou			plied For t Applicable	
Sulte, Apt. #, etc.			27	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>K</b>	\$8.75 Additional Fee Required					
City & State			28				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees						
Zip 24	25		Country         Zip         Cour           29         30						8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
		d Address of Curre	nt Regis	stered Agent			1.		10. Name and Address of New Re	gistered /	gent			
	erveld, dav					61	"	Name						
	1 GREAT OAK ELAND FL 338					82	2	Street Addre	oss (P.O. Box Number is Not Acceptab	ile)				
i						83	3							
•						84	1	City		FL	85	Zip (	Code	
11. Pursuant office or agent. I s SIGNATURE	registered agen am familiar with,	it, or both, in the State and accept the oblig	e of Flori galions o	ida Such change of Section 607.05	was auth 05, Florida	ori≵ed b a Statute	y th	he corporation	oration submits this statement for the p on's board of directors. I hereby accer	urpose of the appo	chang pintme	ging it ent as	s registered registered	
12,	Signature, typed or printed name of registered agent and title if applicable (NOTE Registere OFFICERS AND DIRECTORS 13.							signature require	ADDITIONS/CHANGES TO OFFIC		DIDE	CTOR	C IN 12	
TATLE	P	OF FICENS AF	NE PARIE	DELE	TE	1.1 TITLE	-		ADDITIONS/CHANGES TO OTTIC	Eno AND	Ch		Addition	
NAME	NEDERVELD	, DAVID L.		<u></u>		1.2 NAME								
STREET ADDRESS		OAK DRIVE				1.3 STREE	TAD	DDRESS						
CITY-ST-ZIP	LAKELAND I	FL				1.4 CITY-1	ST-2	7IP						
TITLE	VP			☐ DELE	TE	2.1 TITLE					Ch	ange	Addition	
NAME	MCKELVEY, JOHN							Į						
STREET ADDRESS							TAD	DORESS						
CITY-ST-ZIP	LAKELAND	<u>FL</u>				2. ≰ CI1Y-	ST-	ZIP						
TITLE				DETE.	TE	3.1 TITLE					L] Ch	ange	Addition	
NAME	ļ					3.2 NAME								
STREET ADDRESS						3.3 STREE		1						
CITY-ST-ZIP				DELE	TE	34 CITY-	ST-	ZIP			☐ Ch	2000	Addition	
TITLE . NAME				FT OFFE	16	4.2 NAME	<u>.</u>				الا ب	u ngo	L_J Addition	
STREET ADDRESS						4.3 STREE		nnacce						
CITY-ST-ZIP						4.4 C/1Y-		l						
TITLE				DELE	Τ£	5.1 TITLE	<u> </u>				☐ Ch	ange	Addition	
NAME						5.2-NAME								
STREET ADDRESS						5.3 STREE	TAD	ODRESS						
CITY-ST-ZIP						5.4 <sub>,</sub> C/TY=:	S1-3	ZIP						
TITLE				DELE	1E	6.1 TITLE					Ch	ange	Addition	
NAME						6.2 NAME								
STREET ADDRESS						6.3;STHEE	TAD	DDRESS						
CITY-ST-ZIP	<u> </u>	a information a souli				64CIIY-			in Cooling 110 07/9/6). Elevide Statute					

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 eath; 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 3 if counged, or on an attachment with an address.

ICAIATUDE. CLASSICINATURE OF OPANIA Nederveld, President 04/28/97 941-687-7580