2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 504580

1. Entity Name

CASE ENGINEERING, INC.



FILED Apr 14, 2008 08:00 Al Secretary of State

Principal Place of Business

5925 IMPERIAL PARKWAY

SUITE 226 MULBERRY, FL 33860 Mailing Address

5925 IMPERIAL PARKWAY

SUITE 226

MULBERRY, FL 33860



DO NOT WRITE IN THIS SPACE

01082008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1671697

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NEDERVELD, DAVID L. 5925 IMPERIAL PKWY, STE 226 MULBERRY, FL 33860

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title of applicable (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NEDERVELD, DAVID L. 5925 IMPERIAL PKWY., SUITE 226 MULBERRY, FL 33860				U00000895296 04/24/08-80063-002 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCKELVEY, JOHN 5925 IMPERIAL PKWY STE 226 MULBERRY, FL 33860					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE		
TITLE NAME STREET ADDRESS					· ,	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attactment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

_____ David L. Nederveld

4/11/08

863/701-2822

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #