

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **524579** (0)

1. Corporation Name
CASEY'S EQUIPMENT COMPANY, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 14 AM 10:10

Previous Place of Business Mailing Address
~~6935 OLD GENEY HWY
ORLANDO FL 32807~~ ~~6935 OLD GENEY HWY
ORLANDO FL 32807~~
**909 DENNIS AVENUE 909 DENNIS AVENUE
ORLANDO FL 32807 ORLANDO FL 32807**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	01/27/1977	01/31/1994
22 State, Apt. #, etc.	27 State, Apt. #, etc.	4. FEI Number	Applied For
23 City & State	28 City & State	59-1791316	Not Applicable
24 Zip	29 Country	5. Certificate of Status Desired	\$0.75 Additional Fee Required
25	30	<input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent		8. This corporation has liability for entanglement tax under S. 100.032, Florida Statutes	
CASEY, LARRY H. 909 DENNIS AVENUE ORLANDO FL 32807		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CASEY, LARRY H. 909 DENNIS AVENUE ORLANDO FL 32807		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1500, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (Signature of Registered Agent) _____ (Signature of Secretary or Director)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12a NAME	V HORCHLER, JON 1427 ST. NICHOLAS AVE. CHRISTMAS FL	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12b STREET ADDRESS		12 NAME	
12c CITY - ST - ZIP		13 STREET ADDRESS	
12d		14 CITY - ST - ZIP	
12e NAME	PO CASEY, LARRY H 909 DENNIS AVENUE ORLANDO, FL 00000	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12f STREET ADDRESS		22 NAME	
12g CITY - ST - ZIP		23 STREET ADDRESS	
12h		24 CITY - ST - ZIP	
12i NAME		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12j STREET ADDRESS		32 NAME	
12k CITY - ST - ZIP		33 STREET ADDRESS	
12l		34 CITY - ST - ZIP	
12m NAME		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12n STREET ADDRESS		42 NAME	
12o CITY - ST - ZIP		43 STREET ADDRESS	
12p		44 CITY - ST - ZIP	
12q NAME		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12r STREET ADDRESS		52 NAME	
12s CITY - ST - ZIP		53 STREET ADDRESS	
12t		54 CITY - ST - ZIP	
12u NAME		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12v STREET ADDRESS		62 NAME	
12w CITY - ST - ZIP		63 STREET ADDRESS	
12x		64 CITY - ST - ZIP	

14. I 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)(a), Florida Statutes. I further certify that the information submitted 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. This information is for the records of the Division of Corporations and is subject to inspection by the public. I understand that my signature is required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this document, or on an attachment with my address.

SIGNATURE: Larry H. Casey Larry H. Casey 3-1-95 407-2773858