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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

658636

(6)

JEANNIE CASNELLIE, INC.

FILED
May 06 1998 8:00am
Secretary of State



Principal Place	of Business	Mailing Address	Mailing Address					
1704 CLEARW	ATER LARGO ROAD	P.O. BOX 565						
CUITE C-2 CLEARWATER FL 34816			CLEARWATER FL 34617 US			DO NOT WRITE IN THIS SPACE		
		US				3. Date Incorporated or Qualified		
US						03/07/1980		
6 Principal D	ace of Business	2a, Mailing Address				4, FEI Number Applied For		
	ace of Busilless	<b>├</b> ─-						
21 Suite Apt # ato			Suite, Apt. #, etc.			59-1991374   Not Applicable   \$8.75 Additional		
Suite, Apt. #, etc.		h	27			5. Certificate of Status Desired Fee Regulred		
City & State			City & State			6, Election Campaign Financing \$5.00 May Be		
23		)——, ·	28			Trust Fund Contribution		
Zip	Country	· · · · · · · · · · · · · · · · · · ·	Ziji Country			8. This corporation owes or has paid the current year Intangible		
24	25	29	30	,		Personal Property Tax due June 30.  Yes No		
<b>6</b> 41	Name and Address of Cur		1301			10. Name and Address of New Registered Agent		
CAS	<del></del>	<u>vv</u> _		81	Name			
Casnellie, Jeannie 1435 Gulf to Bay Blvd., Suite B						(50 B. H. J. J. Martin		
	ARWATER FL 33515	C 0		82	2 Street Address (P.O. Box Number is Not Acceptable)			
ULE	MANATER PL 93919			83				
				84	City	FL 85 Zip Code		
Ad Dissevent	to the provisions of Soctions 607.	NO and COZ 1508 Florida	Statutos libo al	DOVIG	namad	corporation submits this statement for the number of changing its registered		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. 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.								
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statules.								
SIGNATURE	Signature, lyped or pointed name of registered		(NOTE Degistory	d Aon	nt nianatuta	e required when reinstaling) DATE		
12.		AND DIRECTORS	13.	u nge	in algridative	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PO	DELET		TLE		Change Addition		
NAME	CASNELLIE, JEANNIE			1.2 NAME				
STREET ADDRESS	1704 CLEARWATER LARGE	n RUAD	1.3 STREET ADDRESS		ADDRESS 1			
CITY-ST-ZIP	CLEARWATER FL	O HOND	1.4 CITY-ST-ZIP					
TITLE	DELETE			2.1 TITLE		Change Addition		
NAME		_	221			-		
STREET ADDRESS					ADDRESS :			
1				2. 4 CITY - ST - ZIP				
CITY-ST-ZIP TITLE	DELETE			3.1 TITLE		Change Addition		
NAME	_ otten			3.2 NAME				
					ADDRESS			
STREET ADDRESS								
CITY-ST-ZIP TITLE		DELET	3.4. C E 4.1 TI		1 - 711,	Change Addition		
		_ //(1.1	4.1 (I					
NAME ATTRET ADDRESS					ADDRESS			
STREET ADDRESS								
CITY-ST-ZIP		☐ DELET	4.4 CI		I - ZIP	Change Addition		
TITLE		0.00				L Charge L Associati		
NAME			5.2 N/		1000-**			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		no.ct	5.4 CI		1 - ZIP	Change Addition		
TITLE		☐ DELET				Li Change Li Adollion		
NAME			6.2 N					
STREET ADDRESS	*		6.3 ST	TREET	ADDRESS			
CITY-ST-ZIP			6.4 CI			1 0 1 40 0 0 0 1 1 1 0 0 1 1 1 0 1 1 1 1		
14   bereby c	edity that the information supplied	d with this filing does not au	alify for the exe	ampl	uon state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information		

indicated on this annual report or supplies that annual people is the 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 of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block at it changed, or on mattracharient with an address