## 4028097 B 5553 C-FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # 681772

(0)

CASEY COX & ASSOCIATES, INC.

FILED									
Apr 28 1997 8:00am									
Secretary of State									

Principal Plac	e of Business	Mailing Address	·						
13080 SOUTH BELCHER RD SUITE A LARGO FL 34649 US		13080 SOUTH BELCHER ROAD SUITE A LARGO FL 33773-1642							
		US		3. Date Incorporated or Qualified 08/12/1980		3a. Date of Last Report 04/23/1996			
	lace of Business	2a. Mailing Address				4. FEI Number		A	pplied For
21	A -da	26				59-2013194		~~	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required			
27						6. Election Campaign Financing \$5.00 May Be			
23		28	i -			Trust Fund Contribution Added to Fees			
Zip 24 Zip 337	Country	Zip	Count	ry		8. This corporation has liability for	ntangible	lax under s	s. 199,032,
24 25	11.9 25		30				] Yes [		
	9, Hame and Address of Correct	t Registered Agent		<u>а</u> т		10. Name and Address of New Re	gistered A	gent	
	, J. CASEY		8	1	Name				
13080 SOUTH BELCHER ROAD				2	Street Addr	ess (P.O. Box Number is Not Acceptab	ole)		
SUITE A LARGO FL 34643			8	3	·				
LANC	30 FL 34043								
			8	4	City		FL	85 70	ATT B
11. Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Statute	L es, the abo	ve.	-named corp	poration submits this statement for the p		LL_changing	its registered
office or r	egistered agent, or both, in the State im familiar with, and accept the obligations.	of Florida. Such change was a	authorized l	bγ	the corporati	ion's board of directors. I hereby accep	ot the appo	sintment as	s registered
•	and accept the orange	mons of, occitor oor.ooo, the	nioa otattii						
SIGNATURE	Signature, typed or printed name of registered age	at and title if applicable (NOT)	Registereo A	\gen	it signature require	ed when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	PD	☐ DELETE	ाः । ।					☐ Change	Addition
NAME	COX, J. CASEY		1.2 NAM	ŧ					
STREET ADDRESS	2840 LA CONCHA DRIVE		1.3 \$1RE	ET A	ADDRESS				
CITY-ST-ZIP	CLEARWATER FL	DELFTE	1.4 CITY		- ZIP			Change	Addition
TITLE NAME		Detrie	2.1 TO LE 2.2 NAMI					Change	Addition
STREET ADDRESS			2.3 STRE		ADINDE CO				
CITY-ST-ZIP			2.4 CITY						
TITLE		☐ DELFTE	3 · TITLE		1-24			Change	Addition
NAME		_	3.2 NAM						<u></u>
STREET ADDRESS			3.3 STRF	(1 A	ADDRESS				
CITY-ST-ZiP	3			/-S1	1 - ZIP				
TITLE	☐ DELETE 4:			E				Change	Addition
NAME			4. 2 NAM	Æ					
STREET ADDRESS			4.3 STRE	ET #	AODRESS				
CITY-ST-ZIP			4.4 CITY	-\$1	- Z(P				
TITLE		☐ DELETE	5.1 TITLE	E				☐ Change	Addition
NAME			5.2 NAM	IF					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE	5.4 City		- 719	· · · · · · · · · · · · · · · · · · ·	<del></del>	Change	Addition
TITLE		☐ DELETE	6 1 111LE					L Change	Addition
NAME PARCET ARROPERS			6.2 NAM		*DDDCCC		_		
STREET ADDRESS	,		64 CITY		ADDRESS				
CITY-ST-ZIP 14. I do here	by certify that the information supplied	d with this filing does not qualif		_		d in Section 119.07(3)(i), Florida Statute	s. I further	certify tha	il the
informatic	on indicated on this annual report or s	upplamental annual recert is to	ina and an	2010	rate and that	my signature shatl have the same lega it as required by Chapter 607, Florida S	ac tootto l	M made ur	ndar aalbi that