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PROFIT CORPORATION **ANNUAL REPORT**

1997

R.L. CASEY, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 842358

(4)

FILED Jan 23 1997 8:00am Secretary of State

Principal Plac	Mailing Address	Address			F THE HERE A DEFENDATION OF THE PROPERTY OF TH	
C/O J. NIXON		C/O J. NIXON DANIEL II	C/O J. NIXON DANIEL III			
7TH FLOOR BRENT BLDG		7TH FLOOR BRENT BLD	7TH FLOOR BRENT BLDG			
PENSACOLA FL 32578		PENSACOLA FL 32576 US	PENSACOLA FL 32576			3. Date Incorporated or Qualified 3a. Date of Last Report
		00				3. Date Incorporated or Qualified 3a. Date of Last Report 01/12/1979 03/14/1996
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number Applied For
21		26				56-1212844 Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & Stat	е	City & State				Election Campaign Financing \$5.00 May Be
23 Zip	Court	28	1 0	- ;	····	Trust Fund Contribution Added to Fees
24	Country	Zip	 -1	untry		8. This corporation has liability for intangible tax under s. 199.032,
[24]	9. Name and Address of Currer	29 29 Angel	30			Florida Statutes Yes No 10, Name and Address of New Registered Agent
DANIEL, J. NIXON III					Name	
	FLOOR BRENT BLDG					
PENSACOLA FL 32576				82	Street	Address (P.O. Box Number is Not Acceptable)
,	CACCEA I E GEOI O			83		
				84	City	FL 85 Zip Code
11. Pursuani	to the provisions of Sections 607.050	2 and 607.1508, Florida State	utes, the	above	-namec	corporation submits this statement for the nursess of changing to resistant
I DINCE OF I	egistered agent, or both, in the State on familiar with land accept the oblig-	orrionga, such change was	: autnoriz	ea ov	une cor	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE		onorio or, Bootion 001.0000, 1	10.100 01	acacoc		
SIGNATORE.	Signature, typed or printed harne of registered ago	ent and too if applicable INC	TE: Register	ed Age	nt signatur	e required when reinstating) DATE
12.	OFFICERS AN		13.	·		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CDT	DELETE	1.1	TITLE		CD Change Addition
NAME	CASEY, ROBERT L SR		1.2	NAME		Robert L. Casey, Sr.
STREET ADDRESS	5906 CARDINAL DR		1.3	STREET	ADDRESS	5906 Cardinal Dr.
CITY-ST-ZIP	GREENSBORO NC	T occurr		CITY-S	T-ZIP	Greensboro, NC 27410
THE	SD Casey, Gracie J. (SEC)	☐ DELETE		TITLE		S Change Addition
NAMÉ CIRCEI AROBERO	5906 CARDINAL DR			NAME		Casey, Gracie J.
STREET ADORESS	GREENSBORO NC				ADDRESS	5906 Cardinal Dr.
CITY+ST+ZIP TITLE	PTD	DELETE		CITY-S	iT - ZIP	Greensboro,NC 27410
NAME	JOHNSON, COMMIE R	better	1	NAME		PD KJ Change LJ Addilion Johnson, Commie R.
STREET ADDRESS	7769 HWY 68 N				ADDRESS	7769 Hwy 68 North
City-ST-ZIP	STOKESDALE NC			CITY-S		Stokesdale, NC 27357
THILE	V	DELETE		title	N-TH-	Change Addition
NAME	HAIRR, FRANK	•		NAME		
STREET ADDRESS	4609 HALE RD				ADDRESS	
CITY - ST - ZIP	CLIMAX, NC.			DITY-S		
TITLE		DELETE		TITLE		T Change K Addition
NAME			5.2	NAME		
STREET ADDRESS			5.3	STREET	ADDRESS	Howerton, Anthony D. 9022 County Line Rd.
CITY-ST-ZIP			5,4 (CITY-S	t-ZIP	Kernersville, NC 27284
TITLE		☐ DELETE	6.1	HTLE		Change Addition
NAME			6.2	NAME		
STREET ADDRESS			6.3	STREET	ADDRESS	
CITY-ST-7IP				CITY-S		
14. I do heret	by cerbfy that the information supplied	d with this bling does not gue	lity for the	AYP.	mbtion s	stated in Section 119.07(3)(i) Florida Statutes I further certify that the

Information indicated on this annual report or supplied with the 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 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 13 if changed, or on an attachment with an address.

Treasurer Anthony D. Howerton

1-16-97

910-292-8227

Daytime Phone 4