

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 842358

1. Entity Name

R.L. CASEY, INC.

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90100 044 ***150.00

Principal Place of Business

C/O J. NIXON DANIEL III
7TH FLOOR BRENT BLDG
PENSACOLA FL 32576

Mailing Address

C/O J. NIXON DANIEL III
7TH FLOOR BRENT BLDG
PENSACOLA FL 32576
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

56-1212844

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DANIEL, J. NIXON III
7TH FLOOR BRENT BLDG
PENSACOLA FL 32576

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. ADDITIONAL LIST OF OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
CASEY, ROBERT
8146 FLATROCK ROAD
STOKESDALE NC 27357 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Same
Same
Same ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CASEY, GRACIE J
8146 FLATROCK ROAD
STOKESDALE NC 27357 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
JOHNSON, COMMIE R
7769 HWY 68 N
STOKESDALE NC ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDC
Same
Same
Stokesdale, NC 27357 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
HAIR, FRANK
4609 HALE RD
CLIMAX, NC ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Same
Same
Same
Climax, NC 27233 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
HOWERTON, ANTHONY D
9022 COUNTY LINE RD
KERNERVILLE NC ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Same
Same
Same
Kernersville, NC 27284 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Anthony Howerton

Treasurer

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-00

336-292-8227

Date

Daytime Phone #

CR2E034 (9/99)