

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Mar 28, 2007
Secretary of State**

DOCUMENT# F60073

Entity Name: CASUAL WAY, INC.

Current Principal Place of Business:

18580 HWY 27
LAKE WALES, FL 33853 US

New Principal Place of Business:

Current Mailing Address:

18580 HWY 27
LAKE WALES, FL 33853 US

New Mailing Address:

FEI Number: 59-2272247 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLINS, RONALD
14 CARSON AVENUE
BABSON PARK, FL 33827 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SULLINS, RONALD,
Address: 14 CARSON AVENUE
City-St-Zip: BABSON PARK, FL 33827

Title: S () Delete
Name: SULLINS, SANDRA
Address: 14 CARSON AVENUE
City-St-Zip: BABSON PARK, FL 33827

Title: T () Delete
Name: SULLINS, RONALD
Address: 14 CARSON AVENUE
City-St-Zip: LAKE WALES, FL 33853

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SULLINS, RONALD D
Address: 14 CARSON AVENUE
City-St-Zip: BABSON PARK, FL 33827

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V.P. () Change (X) Addition
Name: SULLINS, JOSEPH C
Address: 819 BRENTWOOD DRIVE
City-St-Zip: LAKE WALES, FL 33898

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RONALD SULLINS

P

03/28/2007

Electronic Signature of Signing Officer or Director

Date