

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G03004

Entity Name: CASKEY ONE, INC.

FILED  
Feb 27, 2005  
Secretary of State

## Current Principal Place of Business:

8966 BELVEDERE RD.  
8966 BELVEDERE RD  
WEST PALM BCH., FL 334163367 US

## New Principal Place of Business:

641 LIGHTHOUSE DR  
NORTH PALM BCH., FL 334083707 US

## Current Mailing Address:

P.O. BOX 13112  
N. PALM BEACH, FL 33408 US

## New Mailing Address:

FEI Number: 59-2247580      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASKEY, JAMES  
8966 BELVEDERE RD  
WEST PALM BCH., FL 334163367 US

## Name and Address of New Registered Agent:

CASKEY, JAMES  
641 LIGHTHOUSE DRIVE  
NORTH PALM BCH., FL 334083707 US

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:

02/27/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CASKEY, JAMES,  
Address: 641 LIGHTHOUSE DRIVE  
City-St-Zip: N PALM BEACH, FL

Title: ST ( ) Delete  
Name: CASKEY, KAREN CROFT,  
Address: 641 LIGHTHOUSE DRIVE  
City-St-Zip: N. PALM BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CASKEY, JAMES,  
Address: 641 LIGHTHOUSE DRIVE  
City-St-Zip: N PALM BEACH, FL 33408 US

Title: ST (X) Change ( ) Addition  
Name: CASKEY, KAREN CROFT,  
Address: 641 LIGHTHOUSE DRIVE  
City-St-Zip: N. PALM BEACH, FL 33408 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAREN CROFT CASKEY

ST

02/27/2005

Electronic Signature of Signing Officer or Director

Date