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

DOCUMENT # H3
1. Corporation Name
CASEY PROPERTIES, INC. H38483

(4)

FILED Apr 24 1997 8:00am Secretary of State



Principal Plac 3290 BEACH P.O. BOX 10 JACKSONVILI	BLVD. 457	3260 BEACH P.O. BOX 104	Mailing Address 3260 BEACH BLVD. P.O. BOX 10457 JACKSONVILLE FL 32247-0457					
						3. Date Incorporated or Qualified 01/15/1985	3a. Date of La 04/30/1	
	lace of Business	2a. Mailing Add	iress			4. FEI Number		Applied For
21 Suite, Apl.	# etc	Suite, Apt.	# etc			59-2497250		Not Applicable 75 Additional
22	,, oto.	27	.,			5. Certificate of Status Desired		ee Required
City & Stat	e	City & State	City & State			6. Election Campaign Financing \$5.00 May Be		
23 Zip	Country	[28]	Zip Country			Trust Fund Contribution		
24	├ ₁ ′	25 29 30		Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9, Name and Address of Curre					10. Name and Address of New Re		
	ARTIN, MARVIN CASEY			81	Name			
	60 BEACH BLVD.				Street Add	ress (P.O. Box Number is Not Acceptable)		
JA	CKSONVILLE FL 32207			83		· · · · · · · · · · · · · · · · · · ·	·	
				84	0.11		lan!	7. 6. 1.
					City		FL	Zip Code
office or r agent. I a SIGNATURE	to the provisions of Sections 607,054 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag	yations of, Section 60	7.0505, Florida	Statules		poration submits this statement for the patient's board of directors. I hereby acception with the patient of directors and the patient when reviscating	urpose of chang of the appointmen	ing its registered
12.		ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	MADTIN MADVIN CACEV		I.1 TITLE			Cha	inge 🔲 Addition	
NAME STREET ADORESS	GOOT CAROCEN MENU OT			1.2 NAME 1.3 STREET AODRESS				
CITY-ST-ZIP	JACKSONVILLE FL			1.4 CNY-S				
TITLE	D		DELETE 21 18				Cha	inge 🔲 Addition
NAME .	MARTIN, ROLAND P.		2	2 NAME				
STREET ADDRESS	3001 FOREST CIRCLE JACKSONVILLE FL			3 STREET				
CITY-ST-ZIP TITLE	UNOTOOTHILLE I L	——————————————————————————————————————		2 <u>4 GDY-8</u> 3 1 THLE	1 - ZIP		[] Cha	inge Addition
NAME		2		3 2 NAME				, <u></u>
STREET ADDRESS			3	3 3 STREET	ADDRESS			
CITY-ST-ZIP		-·· ·····		34. CITY-S	T-ZIP			
TITLE Name		Ш		LI DITLE Le name			∐ Cha	inge L Addition
STREET ADDRESS				1. 2 NAME 13 STREET	ADDRESS			
CITY-ST-ZIP				1.4 CITY-S				
TITLE			☐ DELETE 5111				Cha	inge Addition
NAME				2 NAME				
STREET ADDRESS				3.3 STREET				
CITY-ST-ZIP TITLE				5.4 CITY-S	1 - ZIF'		Cha	inge Addition
NAME				5.2 NAME				
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY-ST-ZIP				6.4 CITY-S	- 7IF			

I do 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 annual report or supplemental airmust report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if charged, or on an attachment with an address.

anu 200-5221