

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

|                                             |  |                                                                                   |                                                                                                     |
|---------------------------------------------|--|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| CORPORATION<br>ANNUAL REPORT<br><b>1995</b> |  |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Northrup<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---------------------------------------------|--|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|

APPROVED  
AND  
FILED  
JUN 14 1995  
TALLAHASSEE, FLORIDA

**DOCUMENT # H75500 (9)**

1. Corporation Name:  
**CASUAL SHOP, INC.**

|                                                                                     |                                                                         |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| Principal Place of Business:<br><b>1305 POPLAR DRIVE<br/>VENICE FL 34292<br/>US</b> | Mailing Address:<br><b>1305 POPLAR DRIVE<br/>VENICE FL 34292<br/>US</b> |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------|

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                  |  |                                                        |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|--|
| 3. Date of Incorporation or Qualification<br><b>09/11/1985</b>                                                                                   |  | 3a. Date of Last Report<br><b>06/30/1994</b>           |  |
| 4. FEI Number<br><b>59-2578031</b>                                                                                                               |  | Applied For<br><input type="checkbox"/> Not Applicable |  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                        |  | <b>\$8.75 Additional Fee Required</b>                  |  |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>                                                                  |  | <b>\$5.00 May Be Added to Fees</b>                     |  |
| 8. This Corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No |  |                                                        |  |

|                                                                  |  |  |  |                                                         |  |  |  |
|------------------------------------------------------------------|--|--|--|---------------------------------------------------------|--|--|--|
| 9. Name and Address of Current Registered Agent                  |  |  |  | 10. Name and Address of New Registered Agent            |  |  |  |
| <b>GORIN, DAVID D.<br/>1305 POPLAR DRIVE<br/>VENICE FL 34292</b> |  |  |  | 81. Name:                                               |  |  |  |
|                                                                  |  |  |  | 82. Street Address (P.O. Box Number is Not Acceptable): |  |  |  |
|                                                                  |  |  |  | 83.                                                     |  |  |  |
|                                                                  |  |  |  | 84. City: <b>FL</b> 85. Zip Code:                       |  |  |  |

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS           |                                                 | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                   |
|--------------------------------------|-------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| 12.1 NAME<br><b>GORIN, DAVID D.</b>  | 12.2 STREET ADDRESS<br><b>1305 POPLAR DRIVE</b> | 13.1 NAME                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.3 CITY/ST/ZIP<br><b>VENICE FL</b> |                                                 | 13.2 STREET ADDRESS                                   |                                                                   |
| 12.4 CITY/ST/ZIP                     |                                                 | 13.3 CITY/ST/ZIP                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.5 NAME                            |                                                 | 13.4 NAME                                             |                                                                   |
| 12.6 STREET ADDRESS                  |                                                 | 13.5 STREET ADDRESS                                   |                                                                   |
| 12.7 CITY/ST/ZIP                     |                                                 | 13.6 CITY/ST/ZIP                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.8 NAME                            |                                                 | 13.7 NAME                                             |                                                                   |
| 12.9 STREET ADDRESS                  |                                                 | 13.8 STREET ADDRESS                                   |                                                                   |
| 12.10 CITY/ST/ZIP                    |                                                 | 13.9 CITY/ST/ZIP                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.11 NAME                           |                                                 | 13.10 NAME                                            |                                                                   |
| 12.12 STREET ADDRESS                 |                                                 | 13.11 STREET ADDRESS                                  |                                                                   |
| 12.13 CITY/ST/ZIP                    |                                                 | 13.12 CITY/ST/ZIP                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12.14 NAME                           |                                                 | 13.13 NAME                                            |                                                                   |
| 12.15 STREET ADDRESS                 |                                                 | 13.14 STREET ADDRESS                                  |                                                                   |
| 12.16 CITY/ST/ZIP                    |                                                 | 13.15 CITY/ST/ZIP                                     | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information included 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. 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 of changes on an attachment with an address.

SIGNATURE:  **DAVID D. GORIN** **4/29/95 (704) 749-2034**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR