

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # H78185

1. Entity Name
CHARLES P. CASSON, INC.



Principal Place of Business
8141 AQUILA STREET
UNIT 314
PORT RICHEY, FL 34668 US

Mailing Address
PO BOX 131
NEW PORT RICHEY, FL 34656 US

FILED
Mar 21, 2005 08:00 AM
Secretary of State

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01122005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2590690

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CASSON, CHARLES P.
8141 AQUILA STREET
UNIT 314
PORT RICHEY, FL 34668

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000271936
03/21/05-80068-016 158.75

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
CASSON, CHARLES P.
8141 AQUILA STREET UNIT 314
PORT RICHEY, FL 34668

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES P. CASSON

3/17/05

Date

727/843.0327

Daytime Phone #