FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 30 AM 9:50

DOCUMENT # **K73042** **(9)**

1. Corporation Name
O'NEAL INTERIORS, INC.

Principal Place of Business	Mailing Address
C/O WILLIAM J. CASEY 4860 S ORANGE AVE ORLANDO FL 32806 US	C/O WILLIAM J. CASEY 4860 S ORANGE AVE ORLANDO FL 32806 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/15/1989
3a. Date of Last Report: 02/14/1994

2. Principal Place of Business	2a. Mailing Address
21 4860 SO ORANGE AVE	26 SAME
Suite Apt # etc 22 N/A	Suite Apt # etc 27 N/A
City & State 23 ORLANDO, FLORIDA	City & State 28 SAME
Zip / Country 24 32806 / 25 ORANGE	Zip / Country 29 SAME / 30 SAME

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CASEY, WILLIAM J. 4860 S ORANGE AVE ORLANDO FL 32806	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 _____ DATE
(Signature of new registered agent, if being changed) (Former Registered Agent's signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1 TITLE	☐ Change ☐ Addition
NAME	CASEY, WILLIAM J	2 NAME	
STREET ADDRESS	4860 S ORANGE AVE	3 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL	4 CITY ST ZIP	
TITLE	TV	21 TITLE	☐ Change ☐ Addition
NAME	CASEY, EVE J	22 NAME	
STREET ADDRESS	4860 S ORANGE AVE	23 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL	24 CITY ST ZIP	
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	CASEY, JOANNE M	32 NAME	
STREET ADDRESS	4860 S ORANGE AVE	33 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Eve J Casey V.P. (EVE J. CASEY) 6/20/95 407-851-5191
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

0067446 CP