FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 19 1998 8:00am FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS 1**9**98 DOCUMENT # K87752 CASA COLA, INC. Principal Place of Business Mailing Address 180 STATE ROAD 207 180 STATE ROAD 207 ST. AUGUSTINE FL 32095 ST. AUGUSTINE FL 32095 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/12/1989 2. Pr Applied For 4. FEI Number 26. 59-2975510 Not Applicable 21 26 CASA COLA INC. CASA COLA INC. \$8.75 Additional 1985-A MIZELL RD. 5. Certificate of Status Desired 1985-A MIZELL RD. 22 27 Fee Required ST. AUGUSTINE, FL 32084 ST. AUGUSTINE, FL 32084 \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ No g, Name and Address of Current Registered Agent Name and Address of the 81 RUNK, CHRISTOPHER Christopher Runk 100 ON 207 82 1985 Mizell Road ST. AUGUSTINE FL. 20005 St. Augustine, FL 32084 83 84 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** Signature, typed or printed name of registered agent and billion applicable (NOTE: Registered Agent signature required when reinstating) RZE034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE 1.1 TITLE TITL F RUNK, P. BRADLEY NAME 1.2 NAME 180 SR 207 1985 MIZELL STREET ADDRESS 1.3 STREET ADDRESS ST AUGUSTINE FL CITY - ST - ZIP 1.4 CITY - ST - ZIP Change DELETE 2.1 111LE Addition TITLE **RUNK, CHRISTOPHER** NAME 2.2 NAME 480 SR 207 1985 MIZKL STREET ADDRESS 2.3 STREET ADDRESS ST AUGUSTINE FL CITY-ST-ZIP 2.4 CITY - \$1- ZIP DELETE Change Addition TITLE 3.1 TITLE RUNK, ARTHUR H SR. NAME 3.2 NAME MIZKLL RD 180 SR 207-STREET ADDRESS 3.3 STREET ADDRESS ST AUGUSTINE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition TITLE STD DELETE 4.1 TITLE RUNK, ARTHUR H. JR. NAME 4 2 NAME 180 SR 207 STREET ADDRESS 4.3 STHEET ADDRESS ST AUGUSTINE FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 DHE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Addition DELETE Change TITLE 61 TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 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 chapted or on an attachment with an address.

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