FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

Mailing Address

CASEY'S ENTERPRISES OF ORLANDO, INC.

FILED Jan 27 1998 8:00am Secretary of State



| UPPER CODY RD E P O BOX 826 WACISSA FL 32361 US | | | | P O BOX 826 UPPER CODY RD E WACISSA FL 32361 US | | | | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/16/1989 | | | | |
|--|--|--|--|--|---|--------------------------------------|--|--------------------------|--|---------------------------------|-----------------------------------|--------------------------------|--|
| 2. Principal Pl | ace of Busine | ess | 2a. | Mailing Addr | ess | | | | 4. FEI Number | | - | Applied For | |
| 21 | | | 26 | . | | | | | 59-2983743 | | | Not Applicabl | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | | |
| City & State | 9 | | 28 | City & State | | | | | 6. Election Campaign Financing Trust Fund Contribution | | | 0 May Be | |
| Zip | | Country | 20 | Zip | 1 | Country | / | | 8. This corporation owes or has | paid the cu | | | |
| | | | | | 30 | 10 | | | Personal Property Tax due June 30. 🔲 Yes 🔲 No | | | | |
| | 9. Name a | and Address of Curr | ent Regist | tered Agent | | | | - | 10. Name and Address of New | Registered | Agent | | |
| | SEY, LARRY | | | | | 81 | Name | 9 | | | | | |
| P O BOX 826 UPPER CODY RD E WACISSA FL 32361 | | | | | | | 2 Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| WW | UISSA PL S | 2301 | | | | 83 | | | | | | | |
| | | | | | | 84 | City | | | | 85 Zi | p Code | |
| | | | | | | <u> </u> | | | | FL | <u> </u> | | |
| 11. Pursuant I office or re agent, I ar | to the provision egistered age on familiar wit | ons of Sections 607.0 ent, or both, in the Sta n, and accept the obl | 502 and 60 ite of Floric igations of | 07.1508, Florid ta. Such chan , Section 607. | da Statutes, ge was auti 0505, Florid | the abov norized by la Statute | e-named y the col s. | d corpora rporation | ation submits this statement for the 's board of directors. I hereby ac | e purpose o cept the app | oointment | as registered | |
| SIGNATURE | | | | | | | | | | | | | |
| | Signature, typed o | x printed name of registered | | | (NOTE: R | | ent signatur | re required v | when reinstating) ADDITIONS/CHANGES TO OF | DATE |) DIRECTO | ORS IN 12 | |
| 12. | PD | OFFICERS A | MO DIREC | | LETE | 13. | | 7 | ADDITIONS/CHANGES TO OF | LICENS AND | Change | | |
| TITLE | | LARRY H. | | | L 1 1 4 | | | 1 | | | | | |
| NAME | | 826 N/A | | | | 1.2 NAME | | . j | | | | | |
| STREET ADDRESS | WACISSA | | | | | | r address | ' | | | | | |
| CITY-ST-ZIP TITLE | TVACIOO | 714 | | T DE | IFIF | 1.4 CITY - S 2.1 TITLE | ST-ZIP | - | | | ☐ Change | e | |
| NAME | | | | | | 2.2 NAME | | | | | _ • | | |
| STREET ADDRESS | | | | | | 2.3 STREET | r anneess | | | | | | |
| | | | | | | 2. 4 CITY- | | | منعير | .: | | | |
| CITY-ST-ZIP TITLE | | | | □ D£ | LETE | 3.1 TITLE | 01 2.5 | | | | Change | e 🔲 Additìo | |
| NAME | | | | | | 3.2 NAME | | - | | | | | |
| STREET ADDRESS | | | | | | 3.3 STREET | T ADDRESS | ; [| | | | | |
| CITY-ST-ZIP | | | | | | 3.4. CITY- | ST-ZIP | - | | | | | |
| TITLE | | | | DE | LETE | 4.1 TETLE | | | | | Change | e 🔲 Additio | |
| NAME | | | | | | 4. 2 NAME | | | | | | | |
| STREET ADDRESS | | | | | | 4.3 STREET | T ADDRESS | ; | | | | | |
| CITY-ST-ZIP | | | | | • | 4.4 CITY-5 | ST-ZIP | | | | | | |
| TITLE | | • | | | LETE | 5.1 TITLE | | | | | Change | e 📙 Additio | |
| NAME | | | | | | 5.2 NAME | | | | | | | |
| STREET ADDRESS | | | | | | 5.3 STREE | T ADDRESS | ; | | | | | |
| CITY-ST-ZIP | | | | | | 5.4 CITY-5 | ST-ZIP | | | | | | |
| TITLE | | | | DE | LETE | 6.1 TITLE | | | | | ☐ Chang | e L. Additio | |
| NAME | | | | | | 6.2 NAME | | | | | | | |
| STREET ADDRESS | | | | | | 6.3 STREE | T ADDRESS | ; | | | | | |
| CITY-ST-ZIP | | | | | | 6.4 CITY- | ST-ZIP | | | | | | |
| 14. I hereby o | certify that the | information supplied | with this fi | iling does not I report is true | qualify for to and accura | he exemp ate and th | otion stat nat my si | ited in Se ionature : | ction 119.07(3)(i), Florida Statute shall have the same legal effect a | s. I further c is if made ut | ertify that t nder oath; | ne intormation 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: