

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 20 AM 11:24

DOCUMENT # **N27787 (3)**
1. Corporation Name
CASA 12, INC.

Principal Place of Business Mailing Address
2041 TECH PLACE TALLAHASSEE FL 32308 **1006 WAVERLY ROAD TALLAHASSEE FL 32312-2814**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/08/1988** 3a. Date of Last Report **09/30/1994**
4. FEI Number **59-2915458** 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**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent
**DOUGHERTY, RALPH C.
1006 WAVERLY ROAD
TALLAHASSEE FL 32312-2814**

10. Name and Address of New Registered Agent
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 Ralph Dougherty DATE **2/14/95**
Signature, typed or printed name of registered agent or title if applicable. (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
T BRUCKNER, THOMAS 3110 SHARER ROAD TALLAHASSEE FL 32312
P WEST, STANLEY HWY. 267 TALLAHASSEE FL
D YORK, JAMES 607 E. CALL TALLAHASSEE FL *delete*
SD LEPLER, WILLIAM 1401 WASHINGTON STREET TALLAHASSEE FL 32303 *delete*
VPD DOUGHERTY, RALPH 1006 WAVERLY TALLAHASSEE FL 32312-2814
D MEYERS, CHARLES 1200 RICHVIEW RD. TALLAHASSEE FL *delete*

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME **D Taylor, Hugh**
3.3 STREET ADDRESS **3028 Walden Rd**
3.4 CITY-ST-ZIP **Tallahassee, FL 32311**
4.1 TITLE Change Addition
4.2 NAME **SD Archie, Jean**
4.3 STREET ADDRESS **2313 Jackson Bluff Rd #53**
4.4 CITY-ST-ZIP **Tallahassee, FL 32309**
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME **P Bruckner, Anne**
6.3 STREET ADDRESS **2041 East Gate Way**
6.4 CITY-ST-ZIP **Tallahassee, FL 32308**

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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ralph Dougherty DATE **2/14/95**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR