2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000116866

Entity Name: CAS ENTERPRISES, INC.

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

225 EAST LEMON STREET 212 E. HIGHLAND DRIVE 201

SUITE 205

LAKELAND, FL 33801 LAKELAND, FL 33813

Current Mailing Address: New Mailing Address:

225 EAST LEMON STREET 212 E. HIGHLAND DRIVE SUITE 205

LAKELAND, FL 33801 LAKELAND, FL 33813

FEI Number: 01-0560555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WALL, H LEE WALL, HILEE 255 E. LEMON STREET, STE 205 212 E. HIGHLAND DRIVE

LAKELAND, FL 33801 201 LAKELAND, FL 33813 US

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.

SIGNATURE: H. LEE WALL 01/16/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SAPP, CHRISTOPHER SAPP, CHRISTOPHER Name: Name: 225 EAST LEMON STREET, SUITE 205 Address: 212 E. HIGHLAND DRIVE #201 Address: City-St-Zip: LAKELAND, FL 33801 US City-St-Zip: LAKELAND, FL 33813 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER SAPP 01/16/2009 D