2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111057

Entity Name: CASI INVEST, INC.

VΡ

FILED Jun 04, 2008 Secretary of State

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

1815 SW 1ST AVE 1721 SW 1ST AVE

CAPE CORAL, FL 33991 CAPE CORAL, FL 33991

Current Mailing Address: New Mailing Address:

1815 SW 1ST AVE 1721 SW 1ST AVE CAPE CORAL, FL 33991 CAPE CORAL, FL 33991

FEI Number: 22-3879206 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:

STROEMER TUSCAN & COMPANY PA TUSCAN & COMPANY PA 8961 CONFERENCE DR., STE. 2 12621 WORLD PLAZA LANE FORT MYERS, FL 33919 BLDG 55 FORT MYERS, FL 33907 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: JEFFREY M TUSCAN 06/04/2008

> Electronic Signature of Registered Agent Date

> > VΡ

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: DPST (X) Change () Addition SIBILAK, FRANK Name: Name: SIBILAK, FRANK 1815 SW 1ST AVE 1721 SW 1ST AVE Address: Address:

CAPE CORAL, FL 33991 City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip:

Title: Title: () Delete (X) Change () Addition Name: SIBILAK, FRANK Name: SIBILAK, FRANK 1815 SW 1ST AVE 1721 SW 1ST AVE Address: Address: CAPE CORAL, FL 33991 CAPE CORAL, FL 33991 City-St-Zip: City-St-Zip:

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: FRANK SIBILAK **DPST** 06/04/2008