

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000049709

Entity Name: CASSWELL, INC.

FILED
Jul 08, 2008
Secretary of State

Current Principal Place of Business:

491 HAMMOCK DR.
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

6915 STATE ROAD 54
NEW PORT RICHEY, FL 34653

New Mailing Address:

491 HAMMOCK DR.
PALM HARBOR, FL 34683

FEI Number: 72-1599792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKAPIK, MARTY
491 HAMMOCK DR
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

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:

Title: P () Delete
Name: SKAPIK, MARTY
Address: 491 HAMMOCK DR
City-St-Zip: PALM HARBOR, FL 34683

Title: V () Delete
Name: HUGHES, NOEL
Address: 2132 CEDAR DR
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MARTY SKAPIK

PRES

07/08/2008

Electronic Signature of Signing Officer or Director

Date