

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000049709

Entity Name: CASSWELL, INC.

**FILED**  
**Jan 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

491 HAMMOCK DR.  
PALM HARBOR, FL 34683

**New Principal Place of Business:**

**Current Mailing Address:**

491 HAMMOCK DR.  
PALM HARBOR, FL 34683

**New Mailing Address:**

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: MARTY SKAPIK

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

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

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

I hereby 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 all other like empowered.

SIGNATURE: MARTY SKAPIK

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

01/25/2011

\_\_\_\_\_  
Date