


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P05000130278</b> 1. Entity Name CASEY ADD BAT INC.	
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Principal Place of Business 2117 S. BABCOCK STREET, SUITE 260 MELBOURNE, FL 32901	Mailing Address 2117 S. BABCOCK STREET, SUITE 260 MELBOURNE, FL 32901
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<b>DO NOT WRITE IN THIS SPACE</b>
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<b>6. Name and Address of Current Registered Agent</b>  GOLDFARB, BROOKE D 107 S. RIVERSIDE PLACE INDIALANTIC, FL 32903
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<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>

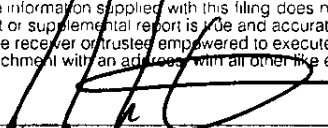
<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>
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9. Election Campaign Financing Trust Fund Contribution, <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KEMP, CASEY 2117 S. BABCOCK STREET, SUITE 260 MELBOURNE, FL 32901
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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<b>DO NOT WRITE IN THIS SPACE</b>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.	
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Casey Kemp IV 8/27/08 (321)684-8888 <small>Date Daytime Phone</small>

**FILED**  
**Sep 02, 2008 08:00 AM**  
**Secretary of State**



08272008 No Chg-P CR2E034 (11/05)

4. FEI Number 22-3916710	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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09/02/08-80004-023 150.00