

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000098487

Entity Name: CASUAL TRADE, INC.

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

1051 MYSTIC HARBOR DRIVE
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

1051 MYSTIC HARBOR DRIVE
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 14-1972954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EAKIN, PAUL M
599 ATLANTIC BLVD SUITE 4
ATLANTIC BEACH, FL 32233 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EBEL, KAI
Address: 1051 MYSTIC HARBOR DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: VSD () Delete
Name: EBEL, SABRINA
Address: 941 MYSTIC HARBOR DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: EBEL, ANNE G
Address: 7036 RAMOTH DR
City-St-Zip: JACKSONVILLE, FL 32226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KAI EBEL

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date