

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -9 AM 10:10

DOCUMENT # P94000000078 (3)

1. Corporation Name
CASSIDY, INC.

Principal Place of Business
409 S.W. 37TH TERRACE
CAPE CORAL FL 33914

Mailing Address
409 S.W. 37TH TERRACE
CAPE CORAL FL 33914

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/30/1993	3a. Date of Last Report 05/01/1994
4. FEI Number 65-0449256	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business 21. 409 SW 37th Terrace Suite, Apt. #, etc. 22. CAPE CORAL, FL City & State 23. 33914 Lee Zip Country 24. 25.	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip Country 29. 30.
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9. Name and Address of Current Registered Agent

DELLIFRANCI, RON
409 S.W. 37TH TERRACE
CAPE CORAL FL 33914

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Ron Dellifranco* *Ron Dellifranco* DATE 2-3-95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	DELLIFRANCI, RON
STREET ADDRESS	409 S.W. 37TH TERRACE
CITY - ST - ZIP	CAPE CORAL FL 33914
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☒ Addition
1.2 NAME	V.P.	
1.3 STREET ADDRESS	RAUL AGUILAR	
1.4 CITY - ST - ZIP	126 W 48th Terrace CAPE CORAL, FL 33914	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ron Dellifranco* *Ron Dellifranco* DATE 2-3-95 945-7769