

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED  
Sep 09 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P94000036251 (4)

1. Corporation Name  
CASELLA & MCMICHAEL, P.A.



Principal Place of Business

1432 FIRST STREET  
SUITE 'C'  
SARASOTA FL 34236  
US

Mailing Address

1432 FIRST STREET  
SUITE 'C'  
SARASOTA FL 34236  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 829 W. DR. MLK BLVD.  
Suite, Apt. #, etc.

22 SUITE 101

23 TAMPA FLORIDA  
Zip Country

24 33603 25 USA

2a. Mailing Address

26 P.O. BOX 426  
Suite, Apt. #, etc.

27 LONGBOAT KEY, FL  
City & State

28 34228 29 34228 30

3. Date Incorporated or Qualified

05/13/1994

3a. Date of Last Report

04/26/1996

4. FEI Number

65-0488937

Applied For

Not Applicable

6. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CASELLA, ROBERT M.  
1432 FIRST STREET  
SUITE C  
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

ROBERT M. CASELLA

82 Street Address (P.O. Box Number is Not Acceptable)

701 HIDEAWAY BAY DRIVE

83

84 City

LONGBOAT KEY

FL

85 Zip Code

34228

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

ROBERT M. CASELLA

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

9/5/97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CASELLA, ROBERT M  
STREET ADDRESS SUITE C, 1432 FIRST STREET  
CITY-ST-ZIP SARASOTA FL

TITLE ☐ DELETE

NAME MCMICHAEL, PAIGE  
STREET ADDRESS SUITE C, 1432 FIRST STREET  
CITY-ST-ZIP SARASOTA FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME CASELLA, ROBERT M.  
1.3 STREET ADDRESS 701 HIDEAWAY BAY DR.  
1.4 CITY-ST-ZIP LONGBOAT KEY, FL 34228

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME MCMICHAEL, PAIGE  
2.3 STREET ADDRESS 701 HIDEAWAY BAY DR.  
2.4 CITY-ST-ZIP LONGBOAT KEY, FL 34228

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 does not qualify for the exemption stated in Section 119.07(3)(i), 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:

ROBERT M. CASELLA

9/5/97 940/782 2528

CR2E034 (4/97)