FILED
Apr 03, 2002 8:00 am
Secretary of State
04-03-2002 90035 005 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000093346

1. Entity Name
CASEY-TOONS, INC.

DO NOT WRITE IN THIS SPACE

B0058746

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
124 TORTUGA LANE	124 TORTUGA LANE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PONTE VEDRA BEACH, FL	City & State: PONTE VEDRA BEACH, FL
Zip: 32082 Country: ST JOHNS	Zip: 32082 Country: ST JOHNS

4. FEI Number — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. **Name and Address of Current Registered Agent**
Name: CASEY LEYDON
Street Address (P.O. Box Number is Not Acceptable): 124 TORTUGA LANE
City: PONTE VEDRA BEACH **FL** Zip Code: 32082

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.

SIGNATURE [signature] 3/28/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☑

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CASEY LEYDON 124 TORTUGA LANE PONTE VEDRA BEACH, FL 32082	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034B (12/01)

13. I 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 3/28/02 904 373 0238
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #