FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 13, 1999 8:00 am
Secretary of State
04-13-1999 90002 029 ***150.00

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DOCUMENT # V36300

1. Corporation Name
DAN CASEY & ASSOCIATES, INC.

Principal Place of Business
1801 CLINT MOORE ROAD
STE 117-A
BOCA RATON FL 33487
US

Mailing Address
21 C LEXINGTON WEST
PALM BEACH GARDENS FL 33418
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/15/1992

2. Principal Place of Business
21 399 W. PALMETTO PARK RD
Suite, Apt. #, etc.
22 Suite # 102
City & State
23 Boca Raton, FL
Zip 24 33432 Country 25 US

2a. Mailing Address
26 10107 Hunt Club Lane
Suite, Apt. #, etc.
27
City & State
28 Palm Beach Gardens, FL
Zip 29 33418 Country 30 US

4. FEI Number: 65-0330725 ☐ Applied For ☐ Not Applicable

5. Certifcate 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 owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CASEY, DAN
21 C LEXINGTON LANE WEST
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent

81 Name: CASEY, DAN
82 Street Address (P.O. Box Number is Not Acceptable): 10107 Hunt Club Lane
83
84 City: P. Bch Gardens FL 85 Zip Code: 33418

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☑ Change ☐ Addition
NAME	CASEY, DAN		1.2 NAME	
STREET ADDRESS	21 C LEXINGTON LN W		1.3 STREET ADDRESS	10107 Hunt Club Lane
CITY-ST-ZIP	PALM BEACH GRDNS FL		1.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33418
TITLE	D	☐ DELETE	2.1 TITLE	☑ Change ☐ Addition
NAME	CASEY, MICHELE		2.2 NAME	
STREET ADDRESS	21 C LEXINGTON LN W		2.3 STREET ADDRESS	10107 Hunt Club Lane
CITY-ST-ZIP	PALM BEACH GRDNS FL		2.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33418
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/99
Date

(561) 775-9149
Daytime Phone #