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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morths m.

Secretary of State DIVISION OF CORPORATIONS

1996

111

1. Corporation Name  FRANK CASSERINO CONSTRUCTION, INC.							
Principal Place of Business Mailing Address							T THE THE PROPERTY OF THE PARTY OF THE P
1554 BOREN DR.: #100 ORLANDO FL 34761		1554 BOREN DR., #100 ORLANDO FL 34761					
	c						3. Date Incorporated or Qualific 07/29/1992
2. Principal Plac	ce of Business	2a. 26	2a. Mailing Address				4. FEI Nuniber 59-3134836
Suite, Apt. #	, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired
City & State		28	City & State			6. Election Campaign Financing Trust Fund Contribution	
Zip <b>24</b>	Country 25	29	Zφ	Go 30	untry		8. This corperation has liability Florida Statutes
	9. Name and Address of	Current Regist	ered Agent		T		10. Name and Address of Ne
-11936 W	INU, FRANK ILLOW GARDENS DR. MERE FL 34786	1554	D CASSERI BOREN DRI FL 3476	VE	81 82 83	Name Street Add	ress (P.O. Box Number is Not Acce

\$5.00 May Be Added to Fees for intangible tax under s 199.032, Yes 🔲 No w Registered Agent otablei **84** City Zip Code 85

3a. Date of Last Report 02/21/1995

Applied For Not Applicable \$8.75 Additional

Fee Required

11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floridu 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 Floridu Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lambiar with, are properlying alignment of properties of properties and properties are properties. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELFTE 1.17II F TITLE CASSERINO, RICHARD J 1.2 NAME NAME 1554 BOREN DR., #100 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 34761 1.4 CITY - \$1.2 P CITY-ST-ZIP ☐ Change Addition DELETE 2 | 1 THEF THILE NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - 7:P CITY-ST-ZIP Change notibbA 🔲 DELETE 3 1 TIPLE TifLE NAME 3.3 STREET ALORESS STREET ADDRESS 3 4 CITY - ST - JIP CITY-ST-ZIP Change Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET AE DRESS STREET ADDRESS 440 TY-ST-21F CITY - ST - ZIP 2<u>000</u>01859162 Addition DELETE 5 11/1E TITLE 5.2 NAME -06/12/96--01018--034 5.3 STREET AS ORESS STREET ADDRESS \*\*\*200.00 5.4 City - \$1 - 3P CITY-ST-ZIP Change Addition DELETE 6 1 THLE TIFLE 6.2 NAME NAME 6.3 STREET AFORESS STREET ADDRESS 6.4 CHY+\$1+316

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)(ii). 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name.

SIGNATURE: 6

IGNING OFFICER OF DIRECTOR

CR2E034 (12/95)