2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #394208*

1. Entity Name

CALLAWAY AND PRICE, INC.



FILED Apr 20, 2007 08:00 A Secretary of State

Principal Place of Business

1639 FORUM PLACE

#5

WEST PALM BEACH, FL 33401-2330

Mailing Address

1639 FORUM PLACE

#5

DO NOT WRITE IN THIS SPACE

WEST PALM BEACH, FL 33401-2330



04182007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1373470

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SLADE, MICHNEL R 1639 FORUM PLACE STE 5

WEST PALM BEACH, FL 33401

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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. If am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P SLADE, MICHAEL R 1639 FORUM PL #5 W PALM BEACH, FL VS
NAME STREET ADDRESS CITY+ST-ZIP	GRAY, HARRY D 1639 FORUM PL #5 W PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT HRABKO, DANIEL P. 1639 FORUM PL 5 W PALM BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHAW, STEPHEN D 1639 FORUM PL 5 W PALM BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PHILLIPS, CURTIS L 1639 FORUM PL #5 WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY-S1-ZIP	V NEILL, STEPHEN G 1639 FORUM PL #5 WEST PALM BEACH, FL 33401

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

KO 4/18/07 561-6

Daytime Phone #