## **2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 191849** 

Entity Name: GALLOWAY'S INC.

**Current Principal Place of Business:** 

711 S. HOWARD AVE, SUITE 200 C/O JENNIFER GALLOWAY, P.A.

TAMPA, FL 33606

## **Current Mailing Address:**

P O BOX 320936 TAMPA, FL 33679 US

FEI Number: 59-0767073 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JENNIFER GALLOWAY, P.A. 711 S. HOWARD AVE SUITE 200 TAMPA FL 33606 US

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:

Electronic Signature of Registered Agent

Date

FILED Jan 11, 2014

**Secretary of State** 

CC2329847439

## Officer/Director Detail:

Title P.T Title VP.S

Name GALLOWAY, JOHN R Name GALLOWAY, JENNIFER L

Address P O BOX 320936 Address 711 S. HOWARD AVE, SUITE 200

City-State-Zip: TAMPA FL 33679 City-State-Zip: TAMPA FL 33606

Title D Title D

Name GALLOWAY, JOHN R Name GALLOWAY, JENNIFER L

Address P O BOX 320936 Address 711 S. HOWARD AVE, SUITE 200

City-State-Zip: TAMPA FL 33679 City-State-Zip: TAMPA FL 33606

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.