

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000009971

**Entity Name:** CALLEN COMPANY, LLC

**Current Principal Place of Business:**

8870 N. HIMES AVE, # 242  
TAMPA, FL 33614

**Current Mailing Address:**

8870 N. HIMES AVE, # 242  
TAMPA, FL 33614

**FEI Number:** 20-0878450

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CALLEN, DAVID H  
8870 N. HIMES AVE, # 242  
TAMPA, FL 33614 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

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	CALLEN, DAVID	Name	CALLEN, NICOLE
Address	8870 N HIMES AVE, # 242	Address	8870 N HIMES AVE, # 242
City-State-Zip:	TAMPA FL 33614	City-State-Zip:	TAMPA FL 33614

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID CALLEN

MGRM

04/18/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date