

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 458452 (0)

1. Corporation Name

CALLAHAN'S SAV-WAY, INC.

Principal Place of Business

SR 26 & NW 2ND ST  
NEWBERRY FL 32669  
US

Mailing Address

PO BOX 430  
TRENTON FLORIDA 32693  
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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9. Name and Address of Current Registered Agent

CALLAHAN, MARVIN L.  
SR. 26 & U.S. 129  
TRENTON FL 33692

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

3. Date Incorporated or Qualified

07/23/1974

3a. Date of Last Report

04/03/1995

4. FEI Number

59-1537498

Applied For

Not Applicable

5. Certificate 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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

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

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

DATE Registered Agent signature entered when registering.

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PD  
MARVIN L. CALLAHAN,  
JENNINGS LAKE & US 129  
TRENTON FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

ST  
CALLAHAN, EVA JO  
JENNINGS LAKE & US 129  
TRENTON FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

AS  
HOWELL, TRACI  
48 RICHLAND DRIVE  
CARTERSVILLE GA

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/96

352-412-2171

CR2E034 (12/95)