

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # 500089

1. Entity Name
CALRAY ENTERPRISES, INC.



Principal Place of Business
**1383 52ND AVE, N.E.
ST. PETERSBURG, FL 33703**

Mailing Address
**1383 52ND AVE, N.E.
ST. PETERSBURG, FL 33703**



02212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1654418

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WEBBER, CAROLE M
1383 52 AVE NE
ST. PETERSBURG, FL 33703**

**DO NOT WRITE
IN THIS SPACE**

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. I 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, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WEBBER, RAY
STREET ADDRESS	1383 52ND AVE N.E.
CITY - ST - ZIP	ST. PETERSBURG FL,
TITLE	SD
NAME	WEBBER, CAROLE M.
STREET ADDRESS	1383 52ND AVE N.E.
CITY - ST - ZIP	ST. PETERSBURG FL,
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1100000118778
04/19/04-80074-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: CAROLE M WEBBER 4-15-04 727-527-1160
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #