


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 13, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 558020**

1. Entity Name  
**DAN CALLAGHAN ENTERPRISES, INC.**



Principal Place of Business      Mailing Address

1301 44TH AVE. E.      1301 44TH AVE. E.  
 BRADENTON, FL 34203      BRADENTON, FL 34203

**DO NOT WRITE IN THIS SPACE**



01032005      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
**59-1795428**      Not Applicable

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

6. Name and Address of Current Registered Agent

**BLALOCK, ROBERT G.**  
 802 11TH STREET WEST  
 BRADENTON, FL 33505

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	CALLAGHAN, ELIZABETH C VP/TREA
STREET ADDRESS	1301 44TH AVE. E.
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	CEO
NAME	CALLAGHAN, DAN CEO
STREET ADDRESS	1301 44TH AVE. E.
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	PRES
NAME	SEVERSON, TODD PRES
STREET ADDRESS	1301 44TH AVE. E.
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	CS
NAME	VIRIGILIO, PATRICIA CRP SEC
STREET ADDRESS	1301 44TH AVE. EAST
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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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:** *Jaded R Swer*      Date \_\_\_\_\_      Daytime Phone # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR