2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # 558020**

1. Entity Name

DAN CALLAGHAN ENTERPRISES, INC.



FILED Jan 18, 2008 08:00 AM Secretary of State

Principal Place of Business

1301 44TH AVE. E. BRADENTON, FL 34203

Mailing Address

1301 44TH AVE. E. BRADENTON, FL 34203



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01042008	01042008 No Chg-P CR2E034 (		1/05)	•
4. FE! Number			Applie	d F
59-1795428			Not Ap	plic

Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

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

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	pove named entity submits this statement for the poligations of registered agent.	ourpose of changing its registered office or	registered agent, or bo	th, in the State of Florida. I am familiar with, and accep
SIGNATU	JRE Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Agent signature	e required when reinstating)	OATE ,
	FILE NOW!!! FEE IS \$150.00 r May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	U00000788636 01/18/08-80050-004 150 <b>.00</b>
10.	OFFICERS AND DIREC	CTORS		
TITLE	VP CALLAGHAN, ELIZABETH C VP/TRE	A		

## STREET ADDRESS 1301 44TH AVE. E. CITY-ST-ZIP BRADENTON, FL 34203 CEO TITLE CALLAGHAN, DAN CEO NAME 1301 44TH AVE. E. STREET ADDRESS CITY-ST-7IP BRADENTON, FL 34203 SEVERSON, TODD PRES 1301 44TH AVE. E. STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34203 TITLE VIRIGILIO, PATRICIA CRP SEC NAME STREET ADDRESS 1301 44TH AVE. EAST CITY-ST-ZIP BRADENTON, FL 34203 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of supplierhental 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 of 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 affact, ment with an address, with all bither like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

78 941-751-152 Date Daytime Phone #