2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007255

Title:

Name:

Address:

City-St-Zip:

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720 OAK CIRCLE DRIVE EAST, SUITE 100

WOMACK, JAMES S III

MOBILE, AL 36609

Entity Name: CALLIS COMMUNICATIONS, INC.

FILED Mar 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 720 OAK CIRCLE DRIVE EAST, SUITE 100 MOBILE, AL 36609 **Current Mailing Address: New Mailing Address:** 720 OAK CIRCLE DRIVE EAST, SUITE 100 MOBILE, AL 36609 FEI Number: 63-1221852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MILLER, EDWIN Name: Name: 720 OAK CIRCLE DRIVE EAST, SUITE 100 Address: Address: City-St-Zip: MOBILE, AL 36609 City-St-Zip: Title: Title: () Delete () Change () Addition Name: PARKER, DEAN N JR. Name: 720 OAK CIRCLE DRIVE EAST, SUITE 100 Address: Address: MOBILE, AL 36609 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition PARKER, DOUGLAS N Name: Name: 720 OAK CIRCLE DRIVE EAST, SUITE 100 Address: Address: City-St-Zip: MOBILE, AL 36609 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DEAN N PARKER, JR. P 03/27/2009

(X) Change () Addition

720 OAK CIRCLE DRIVE EAST, SUITE 100

KANE, THOMAS J

MOBILE, AL 36609