

F16000001968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

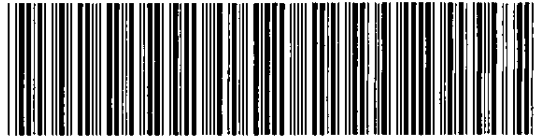
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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RECEIVED  
MAR 30 2016 11:46  
U.S. DEPARTMENT OF STATE  
OFFICE OF THE  
ATTORNEY GENERAL

RECEIVED  
MAR 30 2016 7:49  
U.S. DEPARTMENT OF STATE  
OFFICE OF THE  
ATTORNEY GENERAL

APR 29 2016  
J SHIVERS

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 082030 7712711

AUTHORIZATION :

COST LIMIT : \$ 87.50

ORDER DATE : March 29, 2016

ORDER TIME : 9:35 AM

ORDER NO. : 082030-005

CUSTOMER NO: 7712711

FOREIGN FILINGS

NAME: CALDWELL & GREGORY MANAGEMENT  
CORP

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CALDWELL & GREGORY MANAGEMENT CORP

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

PAUL KACHURAK

Name of Person

CALDWELL & GREGORY MANAGEMENT CORP

Firm/Company

129 BROAD STREET RD, STE A

Address

MANAKIN SABOT, VA 23103

City/State and Zip code

pkachurak@caldwellandgregory.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL KACHURAK

804 784-6100 X405  
at ( )

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 31, 2016

CSC

**RESUBMIT**

Please give original  
submission date as file date.

SUBJECT: CALDWELL & GREGORY MANAGEMENT CORP  
Ref. Number: W16000023698

We have received your document for CALDWELL & GREGORY MANAGEMENT CORP and the authorization to debit your account in the amount of \$87.50. However, the document has not been filed and is being returned for the following:

Please list the complete principal office address.

If you have any further questions concerning your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist III  
Registration/Qualification Section

Letter Number: 616A00006552

RECEIVED  
DEPARTMENT OF STATE  
16 APR 28 PM 2:21

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

CALDWELL & GREGORY MANAGEMENT CORP

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE 3. 26-3570258  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
4. 10/17/2008 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3001 SE ISLAND POINT LANE #44, STUART, FL 34996-4942  
(Principal office address)  
129 BROAD STREET RD, STE A, MANAKIN SABOT, VA 23103  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

16 MAR 30 AM 7:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**9. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Corporation Service Company  
By: \_\_\_\_\_

(Registered agent's signature)

Courtney Williams  
Asst. Vice President

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: JOHN GREGORY  
Address: 3001 SE ISLAND POINT LANE #44, STUART, FL 34996-4942

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: ROBERT J DINNIE  
Address: 129 BROAD STREET RD, STE A, MANAKIN SABOT, VA 23103

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

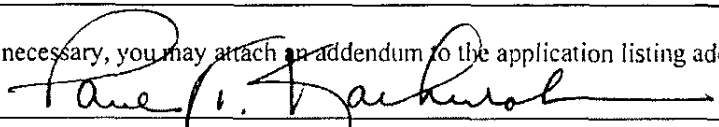
President: ROBERT J DINNIE  
Address: 129 BROAD STREET RD, STE A, MANAKIN SABOT, VA 23103

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: \_\_\_\_\_  
Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. PAUL T KACHURAK, CHIEF FINANCIAL OFFICER  
(Typed or printed name and capacity of person signing application)

16 MAR 30 AM 7:49  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CALDWELL & GREGORY MANAGEMENT CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CALDWELL & GREGORY MANAGEMENT CORP." WAS INCORPORATED ON THE SEVENTEENTH DAY OF OCTOBER, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



4613278 8300

SR# 20161950581

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202061616

Date: 03-29-16