"FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

Change

Change

Addition

Addition

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500005547 (3)

CALLON PETROLEUM COMPANY

CHRISTIAN, DENNIS W

200 N. CANAL ST.

TATUM, H M JR

VTCO

200 N. CANAL ST.

NATCHEZ MS 39120

WEATHERLY, JOHN S

200 N. CANAL ST.

NATCHEZ MS 39120

STANGER, ROBERT A

1129 BROAD ST.

NATCHEZ MS 39120

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Principal Place of Business Mailing Address							P CONTROL THE STATE DESIGN DESIGN STATE ST				
200 N. CANAL ST. NATCHEZ MS 39120		200 N. CANAL ST. NATCHEZ MS 39120-3212									
							Date Incorporated or Qualified 11/13/1995	3a. Date o 05/30/		port	
	ace of Business	28. Mailing Address			4. FEI Number Applied For						
21		26			64-0844345 Not Applicable						
Sulte, Apt	#, etc.	Suite, Apt. #, etc.			5.	Certificate of Status Desired	□ \$	8.7 5 A			
22		27				Fee Required					
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip	Country	Z _I p	Cou	intry		В.	B. This corporation has hability for intangible tax under s. 199.032,				
24	25 29 30					The rest of the second			· <u> </u>		
9. Name and Address of Current Registered Agent						10.	Name and Address of New Re	listered Age	nt		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				81	Name						
				82 Street Address (P.O. Box Number is Not Acceptable)							
				83							
				84	City			8	5 Zip C	odo.	
				04	City			FL °	3 E.ID C	,000	
office or r agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was	s authorize	d by	the cornera	rporation's	on submits this statement for the p board of directors. I hereby accep	urpose of cha t the appoint	inging its ment as r	registered registered	
SIGNATURE	Signature, typed or printed name of registered a	enest and title if applicable (Ni	OTE: Registers	nd Apr	nt signal en rene	artw havin	n reinstation)	DATE		A *** * ***	
					rgiskered Agent signalure required when reinstating) DATE 1B. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	DC DELETE			ITLE		Change				Addition	
NAME .	CALLON, JOHN S			1.P. NAME							
STREET ADDRESS 200 N. CANAL ST.			1.B S	1.B STREET ADDRESS							
CITY-ST-ZIP	TIY-ST-ZIP NATCHEZ MS 39120			1.4 CITY - ST - 7IP							
TITLE	PD DELETE			21 TITLE					Change	Addition	
NAME	CALLON, FRED L			2 P NAME							
STREET ADDRESS 200 N. CANAL ST.				2 B STREET ADDRESS							
\$147011F7 440 00400				2 4 City-S1-7iP							
TITLE	VD: DELETE			31 TITLE					Change	Addition	

SHREWSBURY NJ 07702

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changild, or on an attachment with an address.

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6,3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 C(1Y-S1-ZIP

3.4. CHY-ST-ZIP

The Substhed Whelen Whelen