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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # H92208 1. Corporation Name

CALLAHAN INVESTMENTS, INC.

## FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90002 034 \*\*\*150.00



Principal Place	of Business	Mailing Address						
118 E. 1ST AVE.  CALLAHAN FL 32011  118 E. 1ST AVE.  CALLAHAN FL 32011					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 12/26/1985			
Principal Place of Business     2a. Mailing Address					4. FEI Number	Applied For		
21 Call	ahan, Florida	26			59-2626498			Applicable
Suite, Apt. 1	Suite, Apt. #, etc. 27 Callahan F	allahan Florida		5. Certifcate of Status Desired	Fee Required			
City & State		City & State			Election Campaign Financing	Added to Fees		
Zip	Country	Zip	Country	,	8. This corporation owes the current year tr		_	7.1-
24 320		29 3201/ 30	L		Personal Property Tax.	Yes		No
	9. Name and Address of Curren	t Registered Agent	81	Nome	10. Name and Address of New Registered	Agent		
Ri ID	GESS, GRANVILLE C.		61	Name	·			
303 CENTRE ST. SUITE 200			82	<u> </u>	ress (P.O. Box Number is Not Acceptable)			· ·
	E 200 NANDINA BEACH FL 32034		83					
			84	1	FI	┕┛┇	Zip Co	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was autho	orizea oy	the corporation	poration submits this statement for the purpose con's board of directors. I hereby accept the appearance in the purpose of the	f changin intment a	g its regi:	egistered stered
SIGNATURE								
	Signature, typed or printed name of registered agen			nt signature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIRE	CTOR	S IN 12
12.	PD OFFICERS AN	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	☐ Cha		Addition
TITLE	WRIGHT, WILIAM G.	C Decere			•	<u></u>	•	
NAME	118 E 1 AVE		1.2 NAME	7.10000000				i
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			1.4 CITY-9 2.1 TITLE	ST-ZIP		☐ Cha	nge	Addition
TITLE	-						90	
NAME	COOK, WILLIAM K.		2.2 NAME					
STREET ADDRESS	118 E 1 AVE	i		T ADDRESS				
CITY-ST-ZIP			2.4 CITY-	ST-ZIP		Cha	nge	Addition
TITLE	COLEMAN JAMES M	D DECE 15		ł	<b>-</b>			
NAME	COLEMAN, JAMES M. 118 E 1 AVE		3.2 NAME	TADDDCCC				
STREET ADDRESS	CALLAHAN FL			TADDRESS				
CITY-ST-ZIP	CALLADAN FL	☐ DELETE	3.4. CITY- 4.1 TITLE	SI-ZIP		☐ Cha	nge	Addition
TITLE		D DECET						
NAME			4.2 NAME	!				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		☐ DELETE	4.4 CITY-9	01-ZIP		☐ Cha	nge	Addition
TITLE		ריי ארייניי	5.2 NAME	1		_	J.	
NAME			ľ	T ADDRESS				
STREET ADDRESS			5.4 CITY-5					
CITY-ST-ZIP		DELETE	6.1 TITLE	,, <u>41</u>		☐ Cha	inge	Addition
TITLE			6.2 NAME			_	<b>J</b> -	
NAME				T ADDRESS				
STREET ADDRESS			64 CITY-5					

14. 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE!