2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# H93148

Entity Name: MARY M. CALLAWAY, P.A.

Current Principal Place of Business:

1600 N PALAFOX ST.
P.O. BOX 36097
PENSACOLA, FL 32516

New Principal Place of Business:

1600 N PALAFOX ST.
PENSACOLA, FL 32516

Current Mailing Address:

1600 N PALAFOX ST.
P.O. BOX 36097
PENSACOLA, FL 32516

New Mailing Address:

1600 N PALAFOX ST.
PENSACOLA, FL 32516

FEI Number: 59-2637785 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CALAWAY, MARY M.
1600 N PALAFOX ST.
P.O. BOX 36097 (ZIP 32516)
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

CALAWAY, MARY M.
1600 N PALAFOX ST.
PENSACOLA, FL 32501 US

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: MARY M. CALLAWAY 04/24/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: CALLAWAY, MARY M..
Address: 1600 N PALAFOX ST.
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
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.

SIGNATURE: MARY M. CALLAWAY PRES 04/24/2009
Electronic Signature of Signing Officer or Director Date