

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 23, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000070161

1. Entity Name
CALLOWAY INVESTMENT PROPERTIES, LLC



Principal Place of Business

**314 MADGNOLIA AVE.
PANAM CITY, FL 32401**

Mailing Address

**314 MADGNOLIA AVE.
PANAM CITY, FL 32401**



01052007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1710738

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FILINGS, INC.
3732 NORTHWEST 16TH STREET
FT. LAUDERDALE, FL 33311**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	R.W. WESTERLY CONSTRUCTION, INC.
STREET ADDRESS	5238 JULIE DRIVE
CITY-ST-ZIP	PANAMA CITY, FL 32401
TITLE	MGR
NAME	NORTHSHORE INVESTMENT PROPERTIES, INC.
STREET ADDRESS	314 MAGNOLIA AVE.
CITY-ST-ZIP	PANAMA CITY, FL 32401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

1/16/07

Date

850-785-5555

Daytime Phone #