

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000075921

Entity Name: CALMAC CORPORATION

FILED
Apr 22, 2008
Secretary of State

Current Principal Place of Business:

1811 B EAST FOWLER AVENUE
TAMPA, FL 33612

New Principal Place of Business:

1020 PENWOOD DRIVE
TAMPA, FL 33647

Current Mailing Address:

16020 PENWOOD DRIVE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 59-3669228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANGIONE, RALPH P ESQ
201 N FRANKLIN ST ONE TAMPA CITY CENTER
STE 2600
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARMATAS, JOHN
Address: 16020 PENWOOD DR.
City-St-Zip: TAMPA, FL 33647

Title: T () Delete
Name: ARMATAS, CARON
Address: 16020 PENWOOD DR.
City-St-Zip: TAMPA, FL 33647

Title: VP (X) Delete
Name: ARMATAS, PETER
Address: 7807 BLAIRWOOD CIRCLE N
City-St-Zip: LAKE WORTH, FL 33467

Title: S (X) Delete
Name: KATHY, ARMATAS
Address: 7807 BLAIRWOOD CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN ANDREW ARMATAS

PRES

04/22/2008

Electronic Signature of Signing Officer or Director

Date