

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000029545

FILED
Jan 12, 2009
Secretary of State

Entity Name: GALLOWAY CONSTRUCTION, INC.

Current Principal Place of Business:

1560 PEACHTREE ROAD
APALACHICOLA, FL 32320

New Principal Place of Business:

20 AVENUE D
SUITE 202
APALACHICOLA, FL 32320

Current Mailing Address:

PO BOX 33
APALACHICOLA, FL 323290033

New Mailing Address:

PO BOX 33
APALACHICOLA, FL 32329

FEI Number: 01-0663921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLOWAY, CHARLES H
1560 PEACHTREE ROAD
APALACHICOLA, FL 32320 US

Name and Address of New Registered Agent:

GALLOWAY, CHARLES H
20 AVENUE D
SUITE 202
APALACHICOLA, FL 32320 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:

01/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HEATH GALLOWAY, CHARLES
Address: 1560 PEACHTREE ROAD
City-St-Zip: APALACHICOLA, FL 32320

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GALLOWAY, CHARLES H
Address: 20 AVENUE D, SUITE 202
City-St-Zip: APALACHICOLA, FL 32320

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: CHARLES HEATH GALLOWAY

P

01/12/2009

Electronic Signature of Signing Officer or Director

Date