

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 8:00 am
Secretary of State

03-10-2008 90066 001 ***150.00

DOCUMENT # P07000010711					
1. Entity Name CALHOUN SERVICES, INC.					
Principal Place of Business 304 HUTCH COURT BRANDON, FL 33510 US			Mailing Address 304 HUTCH COURT BRANDON, FL 33510 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03072008 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CALHOUN, JAMES ELIZABETH 304 HUTCH COURT BRANDON, FL 33510				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>	
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: <i>Elizabeth Calhoun</i> - ELIZABETH CALHOUN				DATE: 03/07/2008	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P D	NAME CALHOUN, JAMES	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 304 HUTCH COURT	CITY - ST - ZIP BRANDON, FL 33510		NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 304 HUTCH COURT	CITY - ST - ZIP BRANDON, FL 33510		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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STREET ADDRESS 304 HUTCH COURT	CITY - ST - ZIP BRANDON, FL 33510		NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Elizabeth Calhoun</i> - ELIZABETH CALHOUN				DATE: 03/07/2008 (813) 654-3529	