

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

MAY - 1 PM 3:11

DOCUMENT # P94000023890 (4)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Corporation Name

CALLAHAN MAINTENANCE SERVICE, INC.

Principal Place of Business

Mailing Address

699 DAVIDSON STREET S.E.  
PALM BAY FL 32909

699 DAVIDSON STREET S.E.  
PALM BAY FL 32909

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

03/23/1994

2. Principal Place of Business

2b. Mailing Address

4. FEI Number

Applied For

21

26

59-3232924

Not Applicable

State, Apt # etc

State, Apt # etc

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22

27

6. Election Campaign Financing

\$5.00 May Be Added to Fees

23

28

7. Does corporation keep separate books for contributions to Florida Statutes

Yes  No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CALLAHAN, DAVID J  
699 DAVIDSON STREET S.E.  
PALM BAY FL 32909

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Agent or Registered Agent and Member

Signature of Registered Agent or Registered Agent

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

12-1 TITLE: PVD  
NAME: CALLAHAN, DAVID J  
12-2 STREET ADDRESS: 699 DAVIDSON STREET S.E.  
12-3 CITY, STATE, ZIP: PALM BAY FL 32909

13-1 TITLE:  Change  Addition  
13-2 NAME:  
13-3 STREET ADDRESS:  
13-4 CITY, STATE, ZIP:

12-1 TITLE: STD  
NAME: CALLAHAN, EDWIN J  
12-2 STREET ADDRESS: 699 DAVIDSON STREET S.E.  
12-3 CITY, STATE, ZIP: PALM BAY FL 32909

13-1 TITLE:  Change  Addition  
13-2 NAME: Delete - No longer with corporation.  
13-3 STREET ADDRESS:  
13-4 CITY, STATE, ZIP:

12-1 TITLE:  
NAME:  
12-2 STREET ADDRESS:  
12-3 CITY, STATE, ZIP:

13-1 TITLE:  Change  Addition  
13-2 NAME:  
13-3 STREET ADDRESS:  
13-4 CITY, STATE, ZIP:

12-1 TITLE:  
NAME:  
12-2 STREET ADDRESS:  
12-3 CITY, STATE, ZIP:

13-1 TITLE:  Change  Addition  
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13-3 STREET ADDRESS:  
13-4 CITY, STATE, ZIP:

12-1 TITLE:  
NAME:  
12-2 STREET ADDRESS:  
12-3 CITY, STATE, ZIP:

13-1 TITLE:  Change  Addition  
13-2 NAME:  
13-3 STREET ADDRESS:  
13-4 CITY, STATE, ZIP:

12-1 TITLE:  
NAME:  
12-2 STREET ADDRESS:  
12-3 CITY, STATE, ZIP:

13-1 TITLE:  Change  Addition  
13-2 NAME:  
13-3 STREET ADDRESS:  
13-4 CITY, STATE, ZIP:

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Rule 10.101(f)(9)(B), Florida Statutes. I further certify that the information includes the annual report or supplemental annual report, as here and as made and that my signature shall have the same legal effect as if made under oath. That I am an officer, a director of this corporation, or the resident or transfer agent responsible to compile the report as required by Chapter 100, Florida Statutes, and that my name appears on Block 12 or 13 of this report or on any additional report as addressed.

SIGNATURE: *David J. Callahan*  
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 (407) 723-7313  
Date Date