FILED

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90196 032 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400030160

1. Corporation Name

CALL & GADSDEN, INCORPORATED

Principal P ace of Business Mailing Address								
424 EAST (ALL STREET 424 EAST CALL STREET								
TALLAHASSEE FL 32301 TALLAHASSEE FL 3			01			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
						04/20/1994		
2 Principal P	ace of Business	2a. Mailing Address				4. FEI Number	Apr	clied For
	lace of Dusiness	26				59-3259194		t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.					\$8.75 A	
22	,, 0.00	27				5. Certifcate of Status Desired	Fee Re	
City & Stat	e	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added to	
Zip	Country	Zip	Co	ountry		8. This corporation owes the current year	Intangible	
24	25	29	30			Personal Property Tax.		[∃No
	9. Name and Address of Curre		1	Т		10. Name and Address of New Registere	d Agent	
				81	Name			
FOL			00	Ch A-	dress (P.O. Box Number is Not Acceptable)			
122 SOUTH CALHOUN STREET				82	Street At	raress (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301				83				
				<u> </u>				
				84	City	F	85 Zip C	Code
office or n	to the provisions of Sections 607.09 egistered agent, or both, in the Stat m familiar with, and accept the oblig	te of Florida. Such change w	as authonz	ed by	the corpora	poration submit; this statement for the purpose tion's board of directors. I hereby accept the appropriate the purpose tion's board of directors.	of changing its printment as reg	registered gistered
SIGNATURE						_		
0.010110112	Signature, typed or printed name of registered a				nt signature requ	ured when reinstating) DATE		
12		AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS		
TITLE	D	☐ DELETI	1.1	TITLE			☐ Change	Addition
NAME	VICKERS, RAYMOND B		1.2	NAME	ľ			
STREET ADDRESS	424 EAST CALL STREET		1.3	STREE	TADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL 32301			CITY-S	T-ZIP			
TITLE		☐ DELETI	2.1	2.1 TITLE			Change	Addition
NAME			2.2	NAME				
STREET ADDRESS			2.3	STREE	TADORESS			
CITY-ST-ZIP			2.4	CITY-S	ST-ZIP			
TITLE		☐ DELET		TITLE			Change	Addition
NAME			3.2	NAME				
STREET ADDRESS			3.3	STREE	T ADDRESS			
CITY-ST-ZIP				. CITY-S				
TITLE	<u> </u>	☐ DELET		TITLE			Change	☐ Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further ce tify that the information indicated on this annual report or supplemental ar nual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I ar I an officer or director of the corporation or the receive or trustee empowered to execute this report as required by Chapter 307, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5,3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRES

STREET ADDRES

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

april 23, 1999

Change

Change

☐ Addition

Addition