

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000054236**

1. Corporation Name

MCCALLUM MASONRY, INC.

Principal Place of Business

**3910 S EMMA JANE TER
HOMOSASSA FL 34448**

Mailing Address

**3910 S EMMA JANE TER
HOMOSASSA FL 34448**

FILED
Jul 15, 1999 8:00 am
Secretary of State

07-15-1999 90003 034 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/20/1996

4. FEI Number

59-3407622

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.



Yes



No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MCCALLUM, GRAFTON
3910 S EMMA JANE TER
HOMOSASSA FL 34448**

10. Name and Address of New Registered Agent

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 the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D MCCALLUM, GRAFTON**
STREET ADDRESS **3910 S EMMA JANE TER**
CITY-ST-ZIP **HOMOSASSA FL 34448**

TITLE ☐ DELETE

NAME **D MCCALLUM, JONENE**
STREET ADDRESS **3910 S EMMA JANE TER**
CITY-ST-ZIP **HOMOSASSA FL 34448**

TITLE ☒ DELETE

NAME **OWENS, DANIEL**
STREET ADDRESS **12865 E. LITTLE BEAR CT.**
CITY-ST-ZIP **FLORAL CITY FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Grafton McCallum
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-6-99

Date

3526285924

Daytime Phone #

CR2E034 (5/99)

0104555



3910 S. Emma Jane Terrace
Homosassa Fl.
34448

352-628-5924-home
352-302-4776-cell
352--628-2005 fax

P96000054236
588550-90003-34

July 6, 1999

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: 1999 Profit Corporation Annual Report
Document # P96000054236

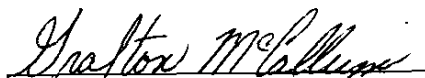
Dear Sir or Madam:

I recently received a 2nd Notice in regards to my 1999 Profit Corporation Annual Report. I had mailed the Report together with check # 1899 in the amount of \$150.00 on April 13, 1999. I immediately contacted your office upon receipt of the 2nd Notice and learned that the report was received; however check # 1899 in the amount of \$ 150.00 had not been processed. I was instructed to send an additional check for \$ 150.00 and re-file a 1999 Profit Corporation Annual Report and it would be processed with no penalty.

If you have any additional questions, please feel free to contact me at the telephone listed above.

Sincerely,

McCallum Masonry, Inc.


Grafton McCallum, President

Enclosure