

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90264 042 ***150.00

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1. Corporation Name

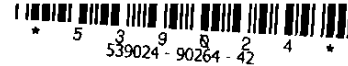
Calio & Shearn Inc.

Principal Place of Business

DTBIA Bayel King

Mailing Address

2923 E Colonial Dr
Orlando FL 32803



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

4. FEI Number

59-3426852

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Denise Calio

81 Name

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

107 Seville Chase Dr

83

84 City

Winter Springs

FL

85 Zip Code
32708

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 D
NAME Calio Denise
STREET ADDRESS 1051 Piedmont Oaks Drive
CITY-ST-ZIP Apopka, FL 32703 ☐ DELETE

TITLE D
NAME Calio Christopher
STREET ADDRESS 1051 Piedmont Oaks Drive
CITY-ST-ZIP Apopka, FL 32703 ☐ DELETE

TITLE D
NAME Shearn Gregory
STREET ADDRESS 1051 Piedmont Oaks Dr
CITY-ST-ZIP Apopka, FL 32703 ☐ DELETE

TITLE D
NAME Shearn Jeffrey
STREET ADDRESS 1051 Piedmont Oaks Drive
CITY-ST-ZIP Apopka, FL 32703 ☐ DELETE

TITLE D
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 107 Seville Chase Dr
1.4 CITY-ST-ZIP Winter Springs FL 32708

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 107 Seville Chase Dr
2.4 CITY-ST-ZIP Winter Springs FL 32708

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 1130 Ponte Newport Terrace #110
3.4 CITY-ST-ZIP Casselberry FL 32707

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 3679 Derbyshire Rd #105
4.4 CITY-ST-ZIP Casselberry FL 32707

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME D Judy A Headlee
5.3 STREET ADDRESS 5500 S-E 42nd Ct
5.4 CITY-ST-ZIP Ocala, FL 34480

6.1 TITLE ☐ Change ☐ Addition
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Denise Calio

4/30/99

Date

(407) 228-4710

Daytime Phone #

CR2E034 (11/98)