CR2E034 (5/98

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P97000008453	(7
CALLY CONCEDITOR	ON INCORPORATED	

SALLY CONSTRUCTION INCORPORATED

APPROVED FLES

98 OCT 16 PM 4: 10

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business	Mailing Address	*** *** -:		
502 E 3RD ST	=			
LYNN HAVEN FL 32444	502 E 3RD ST LYNN HAVEN FL 32444			
	Cital Fill Col 1 C OL 1977		DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified	
			01/23/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For	
21 6923 Hwy 77	26 6923 Hwy 77		59-3423108 Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional	
22	27		5. Certificate of Status Desired Fee Required	
City & State	City & State	and the second of	6. Election Campaign Financing \$5.00 May Be	
23 Southport, Florida	28 Southport, F		Trust Fund Contribution	
Zip Country 24 32409 25 USA	Zip 32409 30	Country USA	8. This corporation owes or has paid the current year Intangible	
9. Name and Address of Current	130	0021	Personal Property Tax due June 30. Yes No	
	Registered Agent	81 Name	10. Name and Address of New Registered Agent	
NABORS, SCOTT R		Cla	yton Syfrett	
456 HARRISON AVE		82 Street Address (P.O. Box Number is Not Acceptable)		
PANAMA CITY FL 32401		83	Magnolia Avenue	
		83		
		84 City Pan	ama City FL 85 Zip Code 32401	
11. Pursuant to the provisions of sections 607.0502	ind 607.1508, Florida Statutes, th	e above-named corpora	ation submits this statement for the purpose of changing its registered	
agent. I am familiar with, and accept the obligati	ons of section 607.0505, Florida	Statutes.	n's board of directors. I hereby accept the appointment as registered	
SIGNATURE Signature, by 3 or printed name of registered agent of	C	SYTON 12. legistered Agent signature requir	SyERETT 10/15/98	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE President	DELETE	1.1 TITLE Vi	ce-President Change 났 Addition	
NAME Ronald M. Battles	-		ger B. Toole	
STREET ADDRESS 502 E. 3rd Street			17 N. Deer Haven Road	
CITY-SI-ZIP Lynn Haven, FL			outhport, FL 32409	
TITLE TITLE	DELETE	0 4 TUTO C	cretary Change XX Addition	
NAME		0.0.1144/F	becca Davis	
STREET ADDRESS			17 N. Deer Haven Road	
City-St-ZiP	<u> </u>	1 4 APPARATE THE	uthport, FL 32409	
TITLE	DELETE :	3.1 TITLE	Change Addition	
NAME	:	3.2 NAME		
STREET ADDRESS] :	3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
रतारह हु	DELETE 4	£.1 TITLE	41111111111111111111111111111111111111	
NAME .		1.2 NAME	400002668264 Addion	
STREET ADDRESS	[4	1.3 STREET ADDRESS	****550.00 *****550.00	
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE	Change Addition	
NAME	15	5.2 NAME	nik ay l	
STREET ADDRESS	5	5.3 STREET ADDRESS	(JK) 110, 200	
CRY-ST-ZIP		5.4 CITY-ST-ZIP	4W100	
TITLE	☐ DELETE	S.1 TITLE	Change Addition	
NAME				
	6	3.2 NAME		
STREET ADORESS	1	3.2 NAME 3.3 STREET ADDRESS		

Li 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:

THE REQUESTED M. Battles, Pros

8/28/98 850-211-3690