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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000037205 (6)

DAWN CALOCA-JOHNSON, P.A.

Principal Place of Business

Mailing Address

3375-H CAPITAL CIRCLE NE. SUITE 3

3375-H CAPITAL CIRCLE NE. SUITE 3

FILED May 11 1998 8:00am Secretary of State



TALLAHASSEE FL 32308		TALLAHASSEE FL 32308			DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualified 04/25/1997			
2. Principal Pl	ace of Businoss	2a. Mailing Address			4. FEI Number		Applie	d For
	1 Killearn Ct.	26 3845-1 Killearn Ct.			59–3441695 Not Applice			
Sulte, Apt. 4	#, etc.	Suite, Apt. #, etc.			6. Certificate of Status Desired		75 Addi ee Requir	
City & State	9	Cily & State			6. Election Campaign Financing		.00 Ma	
23 Talla	hassee, FL	28 Tallahasso	ee, FL		Trust Fund Contribution		ded to F	······································
¬ ^{Zip}	Country	-			8. This corporation owes or has paid the			
24 32308	25 USA 9. Name and Address of Currer	29 32308	30 USA		Personal Property Tax due June 30. 10. Name and Address of New Register	ed Agent	X N	0
	LOCA-JOHNSON, DAWN	it Hohistelen Whelit	81	Name	(U. Maille Bild Addides of flow flogister	ou Agoin		
	45-1 KILLEARN COURT							
	LLAHASSEE FL 32308		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)			
175	PRINCIPLE FOR THE		83	<u> </u>				
			 			1.5		
			84	City	F	=L 85	Zip Cod	10
SIGNATURE	m familiar with, and accept the oblig				oration's board of directors. I hereby accept the			
12.		D DIRECTORS	13.	on organization	ADDITIONS/CHANGES TO OFFICERS A		CTORS IN	N 12
TITLE		DELETE	1.1 TITLE	I	P,VP,S,T	☐ Chi		Addition
NAME			1.2 NAME		Dawn Caloca-Johnson			
STREET ADDRESS			1.3 STREE		8845-1 Killearn Court			
CITY-ST-ZIP			1.4 CITY-	ST-ZIP J	Callahassee, FL 32308			
TITLE		☐ DELETE	2.1 TITLE	-		☐ Cha	ange L] Addition
NAME			2.2 NAME		•			
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		☐ DELETE	2, 4 C/TY-	ST-ZIP		Chi	2000 T	Addition
TITLE			3.1 TITLE			اان لیا	ange L	T VOUIDO:
STREET ADDRESS			3.2 NAME	1 ADDRESS				
CITY-ST-ZIP			3.4. CITY-					
TITLE		DELETE	4.1 TITLE	57 24		Ch	ange _	Addition
NAME		_	4. 2 NAME					
STREET ADDRESS			4.3 STREE	ADDRESS		A		
CITY-ST-ZIP	_		4.4 CITY -	ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		1		ange 🗔	Addition
NAME			5.2 NAME		/./F	77/	//	
STREET ADDRESS			5.3 STREE	1 ADDRESS		14	/	
CITY-ST-ZIP			5.4 CITY	ST-ZIP		{- -	_	T 44200 1
TITLE		☐ DELETE	6.1 TITLE		9000025241	L_I Chi	ange _	Addition
NAME			6.2 NAME		800 0025241 -05/14/98010890	041		
STREET ADDRESS				T ADDRESS	***150.00			
CITY-ST-ZIP			6.4 CITY -	ST-ZIP	answer a color in the			

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.

Dawn Caloca—Johnson President