

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000049807

1. Entity Name
ONE CALL, INC.



Principal Place of Business

**101 SE WALKEDGE DR
FORT WALTON BEACH, FL 32548 US**

Mailing Address

**101 SE WALKEDGE DR
FORT WALTON BEACH, FL 32548 US**

DO NOT WRITE IN THIS SPACE

**FILED
May 01, 2006 08:00 AM
Secretary of State**



04282008 No Chg-P CR2E034 (11/05)

4. FEI Number **59-3454378** Applied For
 Not Applic.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PALANJIAN, TERRY A
101 SE WALKEDGE DR
FORT WALTON BEACH, FL 32548**

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IN THIS SPACE**

6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

**\$5.00 May Be
Added to Fees**

**1000000549638
05/13/06 80030-002 150.00**

10. OFFICERS AND DIRECTORS

**DP
PALANJIAN, TERRY A
101 SE WALKEDGE DR
FT. WALTON BEACH, FL 32548**

**DST
PALANJIAN, LISA S
101 SE WALKEDGE DR
FT. WALTON BEACH, FL 32548**

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lisa S. Palanjian DST* *Lisa S. PALANJIAN 4-28-06 850-302-002*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Evening Phone #