2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State
04-17-2006 90366 022 ***150.00

DOCUMENT # P98000049297

1. Entity Name
CALLAGY TIRE & SERVICE, CORPORATION

40050655

Principal Place of Business	Mailing Address
301 W. COCOA BEACH CAUSEWAY COCOA BEACH, FL 32931	301 W. COCOA BEACH CAUSEWAY COCOA BEACH, FL 32931

04132006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3523545 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FAIRCHILD, BUDDY A
319 WASHINGTON AVE
CAPE CANAVERAL, FL 32920

7. Name and Address of New Registered Agent

Name: Fairchild, Buddy A.
Street Address (P.O. Box Number is Not Acceptable): 1108 Vineland St
City: Cocoa FL Zip Code: 32927

8. 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: Buddy Fairchild Buddy A. Fairchild 4/13/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required) 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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FAIRCHILD, BUDDY A 319 WASHINGTON AVE CAPE CANAVERAL, FL 32920	☐ Delete	P Fairchild, Buddy A 1108 Vineland St Cocoa, FL 32927	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V FAIRCHILD, BUDDY A 319 WASHINGTON AVE CAPE CANAVERAL, FL 32920	☐ Delete	V Buddy Fairchild 1108 Vineland St Cocoa, FL 32927	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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: Buddy Fairchild Buddy A Fairchild 4/13/06 321-783-3838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date