PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000057906 1. Corporation Name

Mar 08, 1999 8:00 am Secretary of State 03-08-1999 90076 024 ***150.00

| CAL-CO | NN CORPORATION | | | | | - 1 | | | | | |
|--|--|--|---|--|--|--------------------------------------|--|---|---|--|-----------------|
| | | | | | | | | | | | |
| Principal Plac | ce of Business | Mailing Add | ress | | | | | IF COTTI OSERI 1911) | | [[[44]]] | |
| HC-5. BOX 892 | | HC-5. BOX 85 | | | | - 1 | | | | | |
| OLD TOWN FL | FL 32680 | | | | | | | | | | |
| | | | | | | 3 0 | ate Incorporated or C | OT WRITE IN T | HIS SPACE | | ٦. |
| | - | • | | | | 1 _ | 5/29/1998 | Zuailleo | | | |
| | Place of Business | 2a. Mailing A | Address | | | | U/23/1330 | | | Applied For | ┨ |
| 21_1901 | SW I3th St | 26 | | | | 5 | 9-35200 | 17 | | lot Applicable | - |
| Suite, Apt. | . #, etc. | Suite, Ap | ot. #, etc. | | | | | | | Additional | 1 |
| 22 | | 27 | | | | 3. C | ertificate of Status De | sired 🔲 | | Required | 1 |
| City & Stat | 11 -1 | City & St | ate | | | 6. EI | ection Campaign Fin | ancing _ | \$5.00 | May Be | 1 |
| 23 Gam | -3,.0-, | 28 | | | | | ust Fund Contribution | | Added | to Fees | |
| Zip 24) うてし | Country 25 USA | Zip | | Countr | Ŋ | | is corporation owes | | | | 7 |
| 141) LU | 9. Name and Address of Cui | 29 | | 30 | | | rsonal Property Tax. | | ☐Yes | No | 4 |
| | S. Wallio and Paddess of Out | Hallt Kedterenen vite | 31(| 8 | 1 Name | 10. N | ome and Address o | New Register | red Agent | | - |
| | iner, calvin g Jr | | | L | | | | | | | |
| | 5, BOX 892 | | | 8: | 2 Street | Address (P.O. | Box Number is Not. | Acceptable) | | | 7 |
| OLD | TOWN FL 32680 | | | 83 | 3 | | | <u> </u> | | | 4 |
| | | | | L | | | | | | | .] |
| | | | | 84 | 4 City | | | | 85 Zip | Code |] |
| | | | | | - 6 | | | | | | |
| 11. Pursuant t | to the provisions of Sections 607.6 | 0502 and 607.1508, Fi | lorida Statute | es, the abov | ve-named | corporation su | brnits this statement | for the gumose | of changing its | registered | ∤ |
| 11. Pursuant i office or re agent. I ar | to the provisions of Sections 607.6 egistered agent, or both, in the Sta m familiar with, and accept the ob- | 0502 and 607.1508, Fi ate of Florida. Such ch ligations of Section & | lorida Statute range was at 17 0505 Flor | es, the above | ve-named y the corpo | corporation su pration's board | brnits this statement of directors. I hereb | for the purpose y accept the ap | of changing its pointment as re | registered egistered | |
| | to the provisions of Sections 607.0 egistered agent, or both, in the St m familiar with, and accept the ob | 0502 and 607.1508, Fl ate of Florida. Such ch ligations of, Section 60 | lorida Statute lange was at 07.0505, Flor | es, the above orthorized by rida Statutes | ve-named y the corpo s. | corporation su Pration's board | bmits this statement of directors. I hereb | for the purpose y accept the ap | of changing its pointment as re | registered egistered | |
| SIGNATURE | Signature typed or primed name of registered | egent and title if applicable. | 07.0505, FRG | inda Statutes | ·3. | corporation su pration's board | | for the purpose y accept the ap | of changing its pointment as re | s registered agistered | |
| SIGNATURE | Signature, typed or printed name of registered OFFICERS | egent and title if applicable. AND DIRECTORS | (NOTE: | Registered Age | ·3. | iquired when reines | | for the purpose y accept the ap | of changing its pointment as re | | /98) |
| SIGNATURE 12. | Signature, typed or printed name of registered OFFICERS | egent and title if applicable. AND DIRECTORS | 07.0505, FRG | Registered Age 13. | sit signature n | iquired when reines | rling) | for the purpose y accept the ap | of changing its pointment as re | | (11/98) |
| SIGNATURE 12. TITLE NAME | Signature, typied or printed name of registered OFFICERS D CONNER, CALVIN G JR | egent and title if applicable. AND DIRECTORS | (NOTE: | 13. 1.1 TITLE 1.2 NAME | ent signature n | iquired when reines | rling) | for the purpose y accept the ap | of changing its pointment as re | DRS IN 12 | 34 (11/98) |
| SIGNATURE 12. TITLE NAME STREET ADDRESS | Signature, typied or printed name of registered OFFICERS D CONNER, CALVIN G JR HC-5, BOX 892 | egent and title if applicable. AND DIRECTORS | (NOTE: | Registered Age 13. 1.1 TITLE 12 NAME 13 STREE | ent signeture n | iquired when reines | rling) | for the purpose y accept the ap | of changing its pointment as re | DRS IN 12 | E034 (11/98) |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typied or printed name of registered OFFICERS D CONNER, CALVIN G JR | epart and title if applicable. AND DIRECTORS | (NOTE: | Registered Age 13. 1.1 TITLE 12 NAME 13 STREE 14 CITY-S | ent signeture n | iquired when reines | rling) | for the purpose y accept the ap | AND DIRECTO | DRS IN 12 | 3R2E034 (11/98) |
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