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 # S75901

(6)

CALCO DEVELOPMENT CORPORATION, INC.

Principal Place of Business

2255 GLADES RD SUITE 219A

Mailing Address

2255 GLADES RD

FILED Apr 21 1998 8:00am Secretary of State



SUITE 219A STE 219A BOCA RATON FL 33431 BOCA RATON FL 33431			DO NOT WRITE IN THIS SPACE		
		US		3. Date Incorporated or Qualified	
				08/22/1991	
	ace of Business	2a. Mailing Address		4. FEI Number Applied For	
	S. FEDERAL HWY	128 1801 S. F	EDERAL H	WV 65-0286180 Not Applicable	
	TE 310	Suite, Apt. #, etc. 27 SUITE 3/6		5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State 23 DEL	RAY BEACH FL	City & State 28 DELRAY BEI	ACH. FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
24 3348	7_7 00 0 00		Country 10 C/ SA	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 🔀 Yes 🔲 No	
	9. Name and Address of Current	Registered Agent	B1 Name	10. Name and Address of New Registered Agent	
RNIGHT, JAMES W 2255 GLADES RD SUITE 219A SUITE 219A BOCA RATON FL 33431				82 Street Address (P.O. Box Number is Not Acceptable) 83 SUITE 310 84 City DELRAY BEACH 85 Zip Code 33483	
11. Pursuant to office or reagent. I ar	o the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligat	and 607.1508, Florida Statutes of Florida. Such change was au- tions of, Section 607.0505, Flori	s, the above-named ithorized by the corr ida Statutes.	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
SIGNATURE .	Signature, typed or printed name of registered agen	Land little if applicable (NOTE:	Registered Agent algnature	required when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TALE	D TAME MA	
NAME	KNIGHT, JAMES W.		1.2 NAME	PNIGHT, JAMES W Change Addition 1801 S. FEDERAL SWATHWY #310	
STREET ADDRESS	2255 GLADES RD #219A		1.3 STREET ADDRESS	1801 S. PEVERAL SHOWN # 310	
CITY+ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	DELRAY BEACH, FL 33483	
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ Addition	
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2. 4 CITY - ST - ZIP	<u> </u>	
TITLE		☐ DELETE	3.1 TITLE	Change Addition	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-S1-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE	Change Addition	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 THTLE	☐ Change ☐ Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	-	DELETE	6.1 TiTL€	☐ Change ☐ Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

14. Thereby 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 arrival 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 receivor 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:

4/14/98 561-279-8601