FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 8:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V43071** **(2)**

1. Corporation Name
CALHOUN SERVICES, INC.

Principal Place of Business	Mailing Address
137 E BALDWIN RD PANAMA CITY FL 32405-4203 US	137 E BALDWIN RD PANAMA CITY FL 32405-4203 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **06/09/1992**
3a. Date of Last Report: **04/21/1994**

2. Principal Place of Business
21: 3100 Wood Valley Road
22: Suite, Apt. #, etc.
23: City & State: Panama City, FL
24: Zip: 32405
25: Country: USA

2a. Mailing Address
26: 3100 Wood Valley Road
27: Suite, Apt. #, etc.
28: City & State: Panama City, FL
29: Zip: 32405
30: Country: USA

4. FEI Number: **59-3123888** ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

CALHOUN, MITCHELL
137 E BALDWIN RD
PANAMA CITY FL 32405 - 4203

10. Name and Address of New Registered Agent

81 Name: Calhoun, Mitchell
82 Street Address (P.O. Box Number is Not Acceptable): 3100 Wood Valley Road
83:
84 City: Panama City **FL** 85 Zip Code: 32405

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Mitchell Calhoun — 4-28-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☑ Change ☐ Addition
NAME	CALHOUN, IRVIN MITCHELL	12 NAME	
STREET ADDRESS	137 E BALDWIN RD	13 STREET ADDRESS	3100 Wood Valley Road
CITY-ST-ZIP	PANAMA CITY FL	14 CITY-ST-ZIP	Panama City, FL 32405
TITLE	D	21 TITLE	☑ Change ☐ Addition
NAME	CALHOUN, ANNA LORETTA	22 NAME	
STREET ADDRESS	137 E BALDWIN RD	23 STREET ADDRESS	3100 Wood Valley Road
CITY-ST-ZIP	PANAMA CITY FL	24 CITY-ST-ZIP	Panama City, FL 32405
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Anna L. Calhoun — Anna L. Calhoun — 4-28-95 — 904 - 872-9138
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0097088 CR