2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003621

FILED Jan 31, 2006 Secretary of State

Entity Name: SETTLER'S RIDGE AT CALICO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

32174 SETTLERS RIDGE DRIVE BRYCEVILLE, FL 32009

Current Mailing Address: New Mailing Address:

PO BOX 28 BRYCEVILLE, FL 32009

FEI Number: 59-3744778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BISCUIT, JENNIFER D

32174 SETTLERS RIDGE DR

BRYCEVILLE, FL 32009 US

MORGAN, TERRY R

32216 SETTLERS RIDGE DR

BRYCEVILLE, FL 32009 US

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.

SIGNATURE: TERRY MORGAN 01/31/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

Name: BISCUIT, JENNIFER D Name: MORGAN, TERRY R

Address: PO BOX 28 Address: PO BOX 28

City-St-Zip: BRYCEVILLE, FL 32009 City-St-Zip: BRYCEVILLE, FL 32009

Title: VD () Delete Title: VD (X) Change () Addition

Name: MURPH, REBECCA Name: BISCUIT, JENNIFER
Address: PO BOX 28 Address: PO BOX 28

City-St-Zip: BRYCEVILLE, FL 32009 City-St-Zip: BRYCEVILLE, FL 32009

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 HARVEY, JUDY
 Name:
 STONE, JOHN

 Address:
 PO BOX 28
 Address:
 PO BOX 28

City-St-Zip: BRYCEVILLE, FL 32009 City-St-Zip: BRYCEVILLE, FL 32009

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRY MORGAN PD 01/31/2006