


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90155 050 ****61.25

DOCUMENT # N04000004910					
1. Entity Name CALLISTA VILLAGE ASSOCIATION, INC.					
Principal Place of Business 2127 RINGLING BLVD 102 SARASOTA, FL 34237		Mailing Address 2127 RINGLING BLVD 102 SARASOTA, FL 34237			
2. Principal Place of Business All Florida Services, Inc. 2831 Ringling Blvd., Suite 218F		3. Mailing Address All Florida Services, Inc. 2831 Ringling Blvd., Suite 218F			
City & State Sarasota, FL 34237		City & State Sarasota, FL 34237		01062006 Chg-NP CR2E037 (11/05)	
Zip		Country		4. FEI Number 20-1343632	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				<input checked="" type="checkbox"/> ALL FLORIDA SERVICES 2831 RINGLING BLVD., STE 218F SARASOTA FL 34237-5334	
REES, STEPHEN D 2033 MAIN STREET SARASOTA, FL 34237				Name	
				Street Address (P.O. Box Number, if Applicable)	
				City	
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: <u>Gerald Bishop</u> 3/1/06 <u>Pres/ Mgmt</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<input type="checkbox"/> \$5.00 May Be Added to Fees Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	DP	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, GARY		NAME		
STREET ADDRESS	2127 RINGLING BLVD SUITE 102		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34247		CITY-ST-ZIP		
TITLE	DV	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIVOLTA, PIERO		NAME		
STREET ADDRESS	2127 RINGLING BLVD SUITE 102		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34247		CITY-ST-ZIP		
TITLE	DST	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JASCH, DAVID		NAME		
STREET ADDRESS	2127 RINGLING BLVD SUITE 102		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34247		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	MARY ANN LOHR	
STREET ADDRESS			STREET ADDRESS	2831 RINGLING BLVD., STE 218F	
CITY-ST-ZIP			CITY-ST-ZIP	SARASOTA FL 34237-5334	
TITLE		<input type="checkbox"/> Delete	TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	TERRI BOYER	
STREET ADDRESS			STREET ADDRESS	2831 RINGLING BLVD., STE 218F	
CITY-ST-ZIP			CITY-ST-ZIP	SARASOTA FL 34237-5334	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Mary Ann Lohr</u> MARY ANN LOHR 3/1/06 9413667466 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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