


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90012 027 ****61.25

DOCUMENT # N28006
 1. Entity Name
 COLONY SOUTH, INC.



Principal Place of Business
 125 COLONY SOUTH DR.
 TARPON SPRINGS, FL 34689 US

Mailing Address
 125 COLONY SOUTH DR.
 TARPON SPRINGS, FL 34689 US

00014000



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01252006 Chg-NP CR2E037 (11/05)

City & State
 Zip Country

4. FEI Number
 59-2908080

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
 GUNTER, ROY E
 40944 US HWY 19 N
 TARPON SPRINGS, FL 34689

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
 Name
 Gerry Calve
 Street Address (P.O. Box Number Not Acceptable)
 112 Colony South Drive
 Tarpon Springs, FL
 City
 Tarpon Springs FL Zip Code
 34689

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 Gerald A. Calve (Gerald A. Calve) DATE 2/1/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUSSELL, CHARLES <input checked="" type="checkbox"/> Delete 114 COLONY SOUTH DR. TARPON SPRINGS, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ERFOURTH, SHARON <input type="checkbox"/> Delete 101 COLONY SOUTH DR. TARPON SPRINGS, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DELELLIS, CHRISTINE <input checked="" type="checkbox"/> Delete 105 COLONY SOUTH DR TARPON SPRINGS, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KARAPHILLIS, MICHAEL <input checked="" type="checkbox"/> Delete 123 COLONY SOUTH DRIVE TARPON SPRINGS, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D D'AGOSTINO, ANNA <input checked="" type="checkbox"/> Delete 113 COLONY SOUTH DR. TARPON SPRINGS, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WISE, SANDRA <input checked="" type="checkbox"/> Delete 116 COLONY SOUTH DR TARPON SPRINGS, FL 34689

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Gerry Calve <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 112 Colony South Drive Tarpon Springs, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Eisa Daniels <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 119 Colony So. Dr. Tarpon Springs, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Phyllis Connolly <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 111 Colony So. Dr. Tarpon Springs, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jeanne Siegfried <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 104 Colony So. Dr Tarpon Springs, FL 34689
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Doris Lauer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 108 Colony So. Dr. Tarpon Springs, FL 34689

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: Gerald A. Calve (Gerald A. Calve) DATE 2/1/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR