2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03345

FILED Aug 09, 2005 Secretary of State

Entity Name: CALICO COUNRY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: SWIFT MANAGEMENT SOLUTIONS 8360 SW 41ST COURT 1750 UNIVERSITY DR #205 DAVIE, FL 33325 CORAL SPRINGS, FL 33071 US New Mailing Address: **Current Mailing Address:** SWIFT MANAGEMENT SOLUTIONS **USA SERVICES** 6915 TAFT STREET 1750 UNIVERSITY DR #205 CORAL SPRINGS, FL 33071 LIS HOLLYWOOD, FL 33024 US FEI Number: 59-2682110 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SWIFT MANAGEMENT & SOLUTIONS **USA SERVICES** 1750 UNIVERSITY DR #205 6915 TAFT STREET CORAL SPRINGS, FL 33071 HOLLYWOOD, FL 33024 US 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: PAUL SHAPIRO 08/09/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GEORGIANNA, MELISSA Name: Name: 8360 SW 41 CT. Address: Address: City-St-Zip: **DAVIE, FL 33325** City-St-Zip: Title: Title: (X) Change () Addition () Delete LOPES, LOU ANN Name: LOPES, LOU ANN Name: Address: 8361 SW 41 CT Address: 8361 SW 41 CT City-St-Zip: **DAVIE, FL 33325** City-St-Zip: **DAVIE, FL 33325** Title: () Delete Title: (X) Change () Addition GROSSWALD, PAM GROSSWALD, GARY Name: Name: 8251 SW 41 CT Address: Address: 8251 SW 41 CT City-St-Zip: **DAVIE. FL 33325** City-St-Zip: DAVIE, FL 33325 Title: () Delete Title: () Change () Addition Name: SADOWSKI, MARY ELLEN Name: 8270 SW 41 COURT Address: Address: City-St-Zip: **DAVIE, FL 33325** City-St-Zip: Title: () Delete Title: (X) Change () Addition GILLINGHAM, SUE MELEGARI, PATRICIA Name: Name: 4151 SW 84 TERR 8221 SW 21ST COURT Address: Address: City-St-Zip: **DAVIE, FL 33325** City-St-Zip: **DAVIE, FL 33325** Title: () Delete Title: (X) Change () Addition QUIJAOLA, JOSE QUIJAOLA, JOSE Name: Name: Address: 8371 SW 41 CT Address: 8371 SW 41 CT **DAVIE, FL 33325** City-St-Zip: **DAVIE, FL 33325** City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MELISSA GEORGIANNA PD 08/09/2005