2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000064963

Entity Name: CALLA HOMES, LLC

Current Principal Place of Business:

FILED May 08, 2006 Secretary of State

1338 LOCHBREEZE WAY ORLANDO, FL 32828 **Current Mailing Address: New Mailing Address:** 1338 LOCHBREEZE WAY ORLANDO, FL 32828 FEI Number: 20-1566933 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CALANDRINO LAW FIRM, P.A. HENDRY, STONER, CALANDRINO & BROWN, P.A. 20 NORTH ORANGE AVENUE 601 NORTH MAGNOLIA ÁVENUE, SUITE 300 ORLANDO, FL 32801 SUITE 600 ORLANDO, FL 32801 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: PHILIP K. CALANDRINO, ATTORNEY AT LAW 05/08/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM () Delete FLOREK, MERILYN MGRM Name:

Address: 10270 5TH AVE

City-St-Zip: COUNTRYSIDE, IL 60525 US

Title: MGRM () Delete

Name: FLOREK, ROBERT MGRM Address: 10270 5TH AVE

COUNTRYSIDE, IL 60525 US City-St-Zip:

Title: MGRM () Delete WASILIEW, HEATHER MGRM Name:

Address: 1338 LOCHBREEZE WAY City-St-Zip: ORLANDO, FL 32828 US Title: () Change () Addition

() Change () Addition

() Change () Addition

New Principal Place of Business:

Name: Address: City-St-Zip:

Title: Name:

Address: City-St-Zip:

Title: Name:

Address: City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MERILYN FLOREK **MGRM** 05/08/2006