

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006653

FILED
Feb 27, 2008
Secretary of State

Entity Name: CALLA TERRACE TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

1110 PINELLAS BAYWAY #207
TIERRA VERDE, FL 33715

New Principal Place of Business:

Current Mailing Address:

1110 PINELLAS BAYWAY #207
TIERRA VERDE, FL 33715

New Mailing Address:

FEI Number: 20-2173744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TIERRA VERDE PROPERTY MGMT.
1110 PINELLAS BAYWAY #207
TIERRA VERDE, FL 33715 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ABBOTT, PHILLIP
Address: 833 3RD AVE N
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: SD () Delete
Name: VANN, KAREN
Address: 833 3RD AVE N
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: TD () Delete
Name: BENNETT, JACKSON
Address: 833 3RD AVE N
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FLEMING, VICTORIA
Address: 1110 PINELLAS BAYWAY #207
City-St-Zip: TIERRA VERDE, FL 33715

Title: STD (X) Change () Addition
Name: HASBACH, ALI
Address: 1110 PINELLAS BAYWAY #207
City-St-Zip: TIERRA VERDE, FL 33715

Title: VPD (X) Change () Addition
Name: BENNETT, JACKSON
Address: 1110 PINELLAS BAYWAY #207
City-St-Zip: TIERRA VERDE, FL 33715

I hereby certify that the information supplied with this filing does not qualify 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: VICTORIA FLEMING

PD

02/27/2008

Electronic Signature of Signing Officer or Director

Date