

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000007506

FILED
May 19, 2008
Secretary of State

Entity Name: CALLISTA CAY H.O.A., INC.

Current Principal Place of Business:

532 BRYN MAWR AVE
SWARTHMORE, PA 19081

New Principal Place of Business:

35 E BALTIMORE AVENUE
2ND FLOOR
MEDIA, PA 19063

Current Mailing Address:

532 BRYN MAWR AVE
SWARTHMORE, PA 19081

New Mailing Address:

35 E BALTIMORE AVENUE
2ND FLOOR
MEDIA, PA 19063

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

STEVEN A WILLIAMSON, JOHNSON, POPE, BOKOR
911 CHESTNUT STREET
CLEARWATER, FL 33756 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: STEVEN A WILLIAMSON, JOHNSON, POPE, BOKOR

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BURKETT, FRANK
Address: 532 BRYN MAWR AVE
City-St-Zip: SWARTHMORE, PA 19081

Title: DVST () Delete
Name: WRIGHT, CARL
Address: 532 BRYN MAWR AVE
City-St-Zip: SWARTHMORE, PA 19081

Title: D (X) Delete
Name: TRAVIESA, TANYA
Address: 532 BRYN MAWR AVE
City-St-Zip: SWARTHMORE, PA 19081

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BURKETT, FRANK
Address: 35 E BALTIMORE AVENUE
City-St-Zip: MEDIA, PA 19063

Title: DVST (X) Change () Addition
Name: WRIGHT, CARL
Address: 35 E BALTIMORE AVENUE
City-St-Zip: MEDIA, PA 19063

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CARL WRIGHT

DVST

05/19/2008

Electronic Signature of Signing Officer or Director

Date