

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001194

FILED  
Jan 17, 2007  
Secretary of State

Entity Name: CALLING ALL COLORS OF FLORIDA, INC.

**Current Principal Place of Business:**

1016 S. LAKESIDE DRIVE  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

1016 S. LAKESIDE DRIVE  
LAKE WORTH, FL 33460

**New Mailing Address:**

FEI Number: 65-0842044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BROWNSTEIN, TED  
1016 S. LAKESIDE DRIVE  
LAKE WORTH, FL 33460 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: D ( ) Delete  
Name: BROWNSTEIN, TED  
Address: 1016 S. LAKESIDE DRIVE  
City-St-Zip: LAKE WORTH, FL 33460

Title: D ( ) Delete  
Name: OLIVER, GINA  
Address: 170 PARK ROAD NORTH  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete  
Name: GUCHANI-ROSENBERG, FARAH  
Address: 4481 CAMROSE LANE  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D ( ) Delete  
Name: ROSENBERG, JOSHUA C  
Address: 4481 CAMROSE LANE  
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D ( ) Delete  
Name: THOMAS-LEAHY, LOURDES  
Address: 628 SNOWDEN DRIVE  
City-St-Zip: LAKE WORTH, FL 33461

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: ( ) Change ( ) Addition  
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 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: TED BROWNSTEIN

D

01/17/2007

Electronic Signature of Signing Officer or Director

Date