

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755984

FILED
Jan 29, 2009
Secretary of State

Entity Name: KIMA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14300 GULF BLVD.
MADEIRA BEACH, FL 33708 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8781
MADEIRA BEACH, FL 337388781

New Mailing Address:

FEI Number: 59-2308369 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUNSFORD, CHARLES D., JR.
15313 HARBOR DRIVE
MADEIRA BEACH, FL 33708 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: LUNSFORD, CHARLES D., JR
Address: 15313 HARBOR DR
City-St-Zip: MADERIA BEACH, FL 33708

Title: VD () Delete
Name: SHEFFIELD, PAT,
Address: 10906 KEWANEE DRIVE
City-St-Zip: TEMPLE TERRACE, FL

Title: D () Delete
Name: SCHILDKNECHT, SCOOTER
Address: 7515 SOMERSET BAY C
City-St-Zip: INDIANAPOLIS, IN

Title: D () Delete
Name: MURPHY, JAMES M
Address: 14300 GULF BLVD #202
City-St-Zip: MADERIA BEACH, FL 33708

Title: D () Delete
Name: WHITE, BERNIE
Address: 7 JUDITH DR.
City-St-Zip: DANBURY, CT 06811

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 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: CHARLES LUNSFORD

PD

01/29/2009

Electronic Signature of Signing Officer or Director

Date