



**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90464 014 \*\*\*\*61.25

<b>DOCUMENT # N07035</b>					
1. Entity Name KINSAIL UNIT 2 ASSOCIATION, INC.					
Principal Place of Business 2910 KERRY FOREST PKWY #A BOX 157 TALLAHASSEE, FL 32309		Mailing Address 2910 KERRY FOREST PKWY #DA BOX 157 TALLAHASSEE, FL 32309			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04272007 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-3065141 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RICE, JEAN M 2617 MARWICH CIRCLE TALLAHASSEE, FL 32309			Name ALAN MITCHELL Street Address (P.O. Box Number is Not Acceptable) 2620 YARMOUTH LN City TALLAHASSEE FL Zip Code 32309		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Alan Mitchell</i>		ALAN MITCHELL - Treasurer		DATE 4-27-07	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLOUGH, KATE 2572 YARMOUTH LN TALLAHASSEE, FL 32309	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DAVE MURPHY 2628 MARWICH CIR TALLAHASSEE FL 32309	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MITCHELL, ALAN 2620 YARMOUTH LN TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JACQUE MITCHELL 2620 YARMOUTH LN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DILLON, MILLICENT 2571 YARMOUTH LANE TALLAHASSEE, FL 32309	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROLLA CARTER JR 2632 SATINWOOD CIR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYNN, LUTHER 2605 YARMOUTH LN TALLAHASSEE, FL 32309	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WANDA LITTLE 4434 SIERRA CT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SAFFER, PAT 2648 SATINWOOD CIR TALLAHASSEE, FL 32309	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCOTTY SHUM 4433 STRATFORDSHIRE CT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCMILLAN, TARA 4427 STRATFORDSHIRE CT TALLAHASSEE, FL 32309	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with or without the empowered.					
SIGNATURE: <i>Alan Mitchell</i>		ALAN MITCHELL		DATE 4-27-07 850-877-9611	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

# ATTACHMENT

40091813  
# N07035

Note - the address + registered agent were corrected on the form I sent in last year. Murphy was added as a director but wasn't on this form. Since at least 3 directors are required that makes 7 officers for most non-profits but only 6 slots to list them in. Maybe some form redesign could add a 7th slot?  
Thanks.

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