I hereby 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 all other like empowered.

### SIGNATURE: PETER LEONE

Electronic Signature of Signing Officer/Director Detail

SIGNATURE:

Officer/Director Detail :			
Title	PRES	Title	TREA
Name	LEONE, PETER	Name	WILDS, CONSTANCE
Address	C/O RESOURCE PROPERTY MANAGEMENT 7300 PARK STREET	Address	C/O RESOURCE PROPERTY MANAGEMENT 7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777	City-State-Zip:	SEMINOLE FL 33777
Title	D	Title	D
Name	LEONE, TONY	Name	CRISTINZO, TONY
Address	C/O RESOURCE PROPERTY MANAGEMENT 7300 PARK STREET	Address	C/O RESOURCE PROPERTY MANAGEMENT 7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777	City-State-Zip:	SEMINOLE FL 33777

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.

RABIN & PARKER, P.A. 28163 US HWY 19N SIUTE 207 CLEARWATER, FL 33761 US

# FEI Number: 59-2180507

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

7300 PARK STREET SEMINOLE, FL 33777 US

**Current Mailing Address:** 

C/O RESOURCE PROPERTY MANAGEMENT

## Entity Name: KALMIA CONDOMINIUM NO. 7, INC.

## **Current Principal Place of Business:**

1524 LAKEVIEW DRIVE CLEARWATER, FL 33756

### **DOCUMENT# 731543**

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Date

04/11/2014 Date

## FILED Apr 11, 2014 Secretary of State CC7917543843

Certificate of Status Desired: No

PRESIDENT