2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755984

Entity Name: KIMA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14300 GULF BLVD.

MADEIRA BEACH, FL 33708

Current Mailing Address:

P.O. BOX 8781

MADEIRA BEACH, FL 33738-8781

FEI Number: 59-2308369 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUNSFORD, CHARLES D., JR. 15313 HARBOR DRIVE MADEIRA BEACH, FL 33708 US

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

FILED Mar 16, 2018

Secretary of State

CC8567038652

Officer/Director Detail :

Title PRESIDENT, DIRECTOR Title DIRECTOR

WHITE, BERNIE SHEFFIELD, PAT Name Name

14300 GULF BLVD. #401 10906 KEWANEE DRIVE Address Address

City-State-Zip: TEMPLE TERRACE FL MADEIRA BEACH FL 33708 City-State-Zip:

TREASURER, DIRECTOR Title Title SECRETARY, VP, DIRECTOR

Name KRUSE, GEORGE B LUNSFORD, CHARLES Name

Address 10 PAPAYA ST. Address 15313 HARBOR DR 1105

City-State-Zip: MADEIRA BCH FL 33708 City-State-Zip:

CLEARWATER FL 33767

Title **DIRECTOR** Title **DIRECTOR**

KABBASH, SAMUEL Name Name DROBES, DAVID

2632 COBBLESTONE DR. Address Address 18006 CLEAR LAKE DR

PALM HARBOR FL 34684 City-State-Zip: City-State-Zip: LUTZ FL 33548

Title DIRECTOR Title DIRECTOR

FEILER, FRED Name Name MEIBERS, LARRY

Address 10280 MCCABE RD Address 3888 HERITAGE PT BLVD

BRIGHTON MI 48116 City-State-Zip: City-State-Zip: MASON OH 45040

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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.

03/16/2018 SIGNATURE: GEORGE B KRUSE TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Name DUNN, L

Address PO BOX 72255

City-State-Zip: MARIETTA GA 30007