2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007
Secretary of State

DOCUMENT# 719180

Entity Name: KALMIA CONDOMINIUM NO. 5, INC.

Current Principal Place of Business:

7300 PARK ST
SEMINOLE, FL 33777 US

New Principal Place of Business:

Current Mailing Address:

7300 PARK ST
SEMINOLE, FL 33777 US

New Mailing Address:

FEI Number: 59-1673186 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REINHARDT, DEBBIE
7300 PARK ST
SEMINOLE, FL 33777 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: DP ( ) Delete
Name: VIDT, VICKI
Address: 1235 S HIGHLAND AVE # 406
City-St-Zip: CLEARWATER, FL 33756

Title: DVP (X) Delete
Name: HOPPE, IRV
Address: 1235 S HIGHLAND AVE # 101
City-St-Zip: CLEARWATER, FL 33756

Title: DS ( ) Delete
Name: DEVRIES, JUDY
Address: 1235 S HIGHLAND AV # 606
City-St-Zip: CLEARWATER, FL 33756

Title: DT ( ) Delete
Name: DEVRIES, RAY
Address: 1235 S HIGHLAND AVE #606
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Delete
Name: CUZYDLO, KEN
Address: 1295 S HIGHLAND AVE #504
City-St-Zip: CLEARWATER, FL 33756

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: D (X) Change ( ) Addition
Name: HOUSTON, ALLAN
Address: 1295 S HIGHLAND AVE #103
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Change (X) Addition
Name: PELKEY, RON
Address: 1295 S HIGHLAND AVE #706
City-St-Zip: CLEARWATER, FL 33756

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: VICKI VIDT P 04/23/2007

Electronic Signature of Signing Officer or Director — Date