

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732712

FILED
Apr 10, 2009
Secretary of State

Entity Name: KING'S CROWN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2721 WEST GULF DR.
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 100
SANIBEL, FL 33957 US

New Mailing Address:

FEI Number: 59-1547841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKESY, STEVE
711 TARPON BAY RD
SANIBEL, FL 33957 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: MALOTT, THOMAS
Address: 2721 W. GULF DR. #217
City-St-Zip: SANIBEL, FL 33957

Title: SD () Delete
Name: GAGLIARDI, GEORGE
Address: 16 VANDERVAER DR
City-St-Zip: TRENTON, NJ 08648

Title: D () Delete
Name: ONG, NICK
Address: 118 18TH AVE
City-St-Zip: HAMPTON, IA 50441

Title: TD () Delete
Name: GRADY, LOIS
Address: 2721 W 6 DR #105
City-St-Zip: SANIBEL, FL 33957

Title: VD () Delete
Name: BOLON, TOM
Address: 2658 BRYDEN RD
City-St-Zip: COLUMBUS, OH 43209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SANNER, ROYCE
Address: 734 WIDSTEN CIRCLE
City-St-Zip: WAYZATA, MN 55391

Title: TD (X) Change () Addition
Name: MARKHUS, ROGER
Address: 47 LONG ACRE RD
City-St-Zip: NEEDHAM, MA 02492

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: GRADY, LOIS
Address: 2721 W 6 DR #105
City-St-Zip: SANIBEL, FL 33957

Title: VD (X) Change () Addition
Name: KINNEY, PATRICK
Address: 5615 GATEWOOD LANE
City-St-Zip: GREENDALE, WI 53129

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: ROYCE SANNER

PD

04/10/2009

Electronic Signature of Signing Officer or Director

Date