## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 737985** 

FILED Mar 27, 2008 Secretary of State

Entity Name: KING ARTHUR'S COURT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2708 ALT 19 NORTH SUITE 603 PALM HARBOR, FL 34683 **New Mailing Address: Current Mailing Address:** 2708 ALT 19 NORTH SUITE 603 PALM HARBOR, FL 34683 FEI Number: 59-1794539 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PMS MANAGEMENT SERVICES 2708 ALT 19 NORTH SUITE 603 PALM HARBOR, FL 34683 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition CULVER, STEVEN ROGERS, MIKE Name: Name: 1146 KING ARTHURS COURT #102 Address: 1127 KING ARTHURS COURT #305 Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 Title: PD () Delete Title: (X) Change ( ) Addition FIORDA, JAMES Name: CULVER, STEVEN Name: Address: 1147 KING ARTHUR CT. # 215 Address: 1146 KING ARTHUR CT. # 102 City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 Title: () Delete Title: (X) Change ( ) Addition HIONEDES, ANN SHADOW, ROGERS Name: Name: 1147 KING ARTHURS COURT #216 1137 KING ARTHURS COURT #507 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 (X) Change ( ) Addition Title: TD ( ) Delete Title: TD Name: SHADOW, ROGER Name: HIONEDES, ANN 1137 KING ARTHURS COURT, # 507 1147 KING ARTHURS COURT, #216 Address: Address: City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: DUNEDIN, FL 34698 Title: () Delete Title: () Change () Addition LAPOINTE, HELENE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: MIKE ROGERS PRES 03/27/2008

1127 KING ARTHURS COURT # 303

DUNEDIN, FL 34698

Address:

City-St-Zip: