2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750243

Apr 28, 2008 Secretary of State

Entity Name: MALYN CONDOMINIUM MOTEL ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

282-107TH AVENUE

TREASURE ISLAND, FL 33706 US

Current Mailing Address: New Mailing Address:

282 107TH AVE

TREASURE ISLAND, FL 33706 US

FEI Number: 59-1963755 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:

WILLIS, VICTOR A 4629 W BAY CT AVE TAMPA, FL 33611

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BENZING, EDWARD BENZING, EDWARD Name: Name: 8481 CHESTNUT RIDGE RD Address: 8481 CHESTNUT RIDGE RD Address: City-St-Zip: GASPORT, NY 14067 City-St-Zip: GASPORT, NY 14067

Title: () Delete Title: (X) Change () Addition GRAFTON, ABBOTT T Name: GRAFTON, ABBOTT T Name:

Address: 282 107TH AVE #124 Address: 282 107TH AVE #124 City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706

Title: () Delete Title: (X) Change () Addition SANSOME, VINCENT SANSONE, VINCENT Name: Name:

Address: 12730 MORGAN RD Address: 12730 MORGAN RD City-St-Zip: HUDSON, FL 34669 City-St-Zip: HUDSON, FL 34669

Title: () Delete Title: (X) Change () Addition

Name: COLEMAN, PHILIP Name: COLEMAN, PHILIP 551 PITTSBURGH RD 551 PITTSBURGH RD Address: Address: City-St-Zip: BROWNSVILLE, PA 15417 City-St-Zip: BROWNSVILLE, PA 15417

Title: () Delete Title: (X) Change () Addition

BRIODY, PAUL BRIODY, PAUL Name: Name:

14656 VILLAGE GLENN CIRCLE 14656 VILLAGE GLENN CIRCLE Address: Address:

TAMPA, FL 33618 City-St-Zip: TAMPA, FL 33618 City-St-Zip:

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: VICTOR WILLIS RΑ 04/28/2008