2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000040974

City-St-Zip:

FILED Dec 16, 2009 Secretary of State

Entity Name: KINGS POINT MANAGEMENT, LLC **Current Principal Place of Business: New Principal Place of Business:** 1021 OAK STREET JACKSONVILLE, FL 32204 **Current Mailing Address: New Mailing Address:** 1021 OAK STREET JACKSONVILLE, FL 32204 FEI Number: 20-8852589 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: SANTA ROSA ISLAND COMPANY SANTA ROSA ISLAND COMPANY 7000 WEST ATLANTIC AVENUE 1021 OAK STREET DELRAY BEACH, FL 33446 JACKSONVILLE, FL 32204 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: 12/16/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: () Change () Addition SANTA ROSA ISLAND COMPANY Name: Name: Address: 1021 OAK STREET Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: Title: Title: () Change (X) Addition () Delete Name: Name: ANZALONE, GINGER Address: Address: 1021 OAK STREET City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32204 Title: () Delete Title: VP/T () Change (X) Addition ARMSTRONG, DANIEL P Name: Name: 1021 OAK STREET Address: Address:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

City-St-Zip:

JACKSONVILLE, FL 32204

SIGNATURE: DANIEL P. ARMSTRONG VP 12/16/2009