

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001160

FILED
Feb 29, 2008
Secretary of State

Entity Name: KINGSTOWN REEF CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12000 INTERNATIONAL DRIVE
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

9805 WILLOWS RD.
REDMOND, WA 98052

New Mailing Address:

FEI Number: 59-3632379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PRES () Delete
Name: TOWNSEND, STEVE
Address: 9805 WILLOWS ROAD
City-St-Zip: REDMOND, WA 98052

Title: VP () Delete
Name: AKINS, DAVE
Address: 9805 WILLOWS ROAD
City-St-Zip: REDMOND, WA 98052

Title: S () Delete
Name: LYDON, STEVE
Address: 9805 WILLOWS ROAD
City-St-Zip: REDMOND, WA 98052

Title: D (X) Delete
Name: GUTHRIE, MIKE
Address: 9805 WILLOWS ROAD
City-St-Zip: REDMOND, WA 98052

Title: D (X) Delete
Name: SHANNON, ED
Address: 9805 WILLOWS RD. NE
City-St-Zip: REDMOND, WA 98052

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LYDON, STEVE
Address: 9805 WILLOWS ROAD
City-St-Zip: REDMOND, WA 98052

Title: VP (X) Change () Addition
Name: SHANNON, ED
Address: 9805 WILLOWS ROAD
City-St-Zip: REDMOND, WA 98052

Title: S (X) Change () Addition
Name: MCANINCH, AVERY
Address: 9805 WILLOWS ROAD
City-St-Zip: REDMOND, WA 98052

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

Title: () Change () Addition
Name:
Address:
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: STEVE LYDON

PRES

02/29/2008

Electronic Signature of Signing Officer or Director

Date