2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007645

FILED Aug 30, 2007 Secretary of State

Entity Name: SAN REMO CONDOMINIUM ASSOCIATION OF REDINGTON SHORES, INC.

Current Principal Place of Business: New Principal Place of Business: 18320 GULF BLVD REDINGTON SHORES, FL 33708 **Current Mailing Address: New Mailing Address:** SRCA-RS C/O TIKI HUT 1901 E. TIMBERLANE DR. PLANT CITY, FL 33563 FEI Number: 59-3071808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOLF, KATHLEEN WOLF, KATHLEEN 7022 JASMIN DR 12122 SPARTAN WAY UNIT 104 NEW PORT RICHEY, FL 34652 US BAYONET POINT, FL 34667 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: KATHLEEN WOLF 08/30/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete WOLF, KATHLEEN WOLF, KATHLEEN Name: Name: 12122 SPARTAN WAY UNIT 104 Address: 7022 JASMIN DR Address: City-St-Zip: BAYONET POINT, FL 34667 City-St-Zip: NEW PORT RICHEY, FL 34652 Title: SD Title: () Delete () Change () Addition HUNT, BECKY Name: Name: Address: 6013 PRATT ST Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: Title: () Delete Title: () Change () Addition COUCH, TOM Name: Name: 7329 SECOND AVE. NORTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: DEBRUIJN, BART Name: 13799 PARK BLVD #263 Address: Address: City-St-Zip: SEMINOLE, FL 33776 City-St-Zip: Title: Title: () Delete () Change () Addition PALMER, ROBERT 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: KATHLEEN WOLF **PRES** 08/30/2007

3930 CANYON LAKE POINT

LAKELAND, FL 33813

Address:

City-St-Zip: