2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State
01-29-2008 90006 036 ****70.00

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1. Entity Name
KINGS BAY NEIGHBORHOOD ASSOCIATION INC.

40011989

Principal Place of Business	Mailing Address
1030 N. CRESCENT DR CRYSTAL RIVER,, FL 34429 US	1030 N. CRESCENT DR CRYSTAL RIVER,, FL 34429 US

01182008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
816 SE 1st Court	560 NW 14th Place
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Crystal River, FL	City & State: Crystal River, FL
Zip: 34429 Country: Citrus	Zip: 34428 Country: Citrus

4. FEI Number 59-3725175 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JANNARONE, GAIL L 1030 N. CRESCENT DR CRYSTAL RIVER,, FL 34429	Name: Arthur W. Jones Street Address (P.O. Box Number is Not Acceptable): 560 NW 14th Place City: Crystal River FL Zip Code: 34428

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Arthur W. Jones Arthur W. Jones, Secretary 1-28-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JANNARONE, GAIL L 1030 N. CRESCENT DR CRYSTAL RIVER,, FL 34429	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Arthur W. Jones 560 NW 14th Place Crystal River, FL 34428	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HOPKINS, NORMAN K 1030 N. CRESCENT DR CRYSTAL RIVER,, FL 34429	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Dee Atkins 3851 N. Nokomis Point Crystal River, FL 34428	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BERG, BARBARA 217 SW KINGS BAY DR. CRYSTAL RIVER,, FL 34429	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Norman K. Hopkins 1030 N. Crescent Dr. Crystal River, FL 34429	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ATKINS, DEE 3851 N. NOKOMISPOINT CRYSTAL RIVER,, FL 34428	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Joanne Kendall 816 SE 1st Court Crystal River, FL 34429	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JANNARONE, PHILIP A 1405 SE FIFTH AVE. CRYSTAL RIVER,, FL 34429	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Donnie Taylor 746 SE 1st Court Crystal River, FL 34429	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KENDALL, JOANNE 816 FIRST COURT CRYSTAL RIVER,, FL 34429	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D George Renshaw 813 SW Kings Bay Dr. Crystal River, FL 34429	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Arthur W. Jones Arthur W. Jones, Secretary 1-28-08 727-642-7659
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #