2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01889

FILED Mar 18, 2009 Secretary of State

Entity Name: ALIKI GOLD COAST CONDOMINIUM NO. ONE MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1601 N CENTRAL AVE FLAGLER BEACH, FL 32136 US **Current Mailing Address: New Mailing Address:** 1601 N CENTRAL AVE FLAGLER BEACH, FL 32136 US FEI Number: 59-2412822 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: BAYER, DENNIS K BAYER, DENNIS K 109 SOUTH 6TH STREET 109 SOUTH 6TH STREET US SUITE 200 FLAGLER BEACH, FL 32136 FLAGLER BEACH, FL 32136 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: 03/18/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MASON, HENRY M Name: Name: 1601 N. CENTRAL AVE #801 Address: Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: Title: Title: (X) Change () Addition () Delete CHAGNON, SALLY Name: BEZDEK, HUGO Name: Address: 1601 N CENTRAL AVE #501 Address: 1601 N CENTRAL AVE #503 City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: FLAGLER BEACH, FL 32136 Title: () Delete Title: (X) Change () Addition ZIMLICH, PAT DAY, ANNA MARIE Name: Name: 1601 N CENTRAL AVE #102 170 FOREST HALL PLACE Address: Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: FAYETTEVILLE, GA 30214 Title: () Delete Title: ΑТ (X) Change () Addition Name: DAY, AUNA MARIE Name: ZIMLICH, PAT 170 FOREST HALL PLACE 1601 N. CENTRAL AVE. #102 Address: Address: City-St-Zip: FAYETTEVILLE, GA 30214 City-St-Zip: FLAGLER BEACH, FL 32136 Title: () Delete Title: (X) Change () Addition BEZDEK, HUGO WHITESIDE, DAVID Name: Name: 1601 N. CENTRAL AVE #503 7728 WOODDALE LANE Address: Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: JACKSONVILLE, FL 32256 Title: () Delete Title: () Change () Addition LOUK MARY Name: Name: Address: 1601 N. CENTRAL AVE. #602 Address: FLAGLER BEACH, FL 32136 City-St-Zip: 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: HENRY M. MASON P 03/18/2009