2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001343

Entity Name: KINGSOUTH CONDOMINIUM ASSOCIATION, INC.

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

PROPERTY SERVICES INC 8641 BAYPINE RD., SUITE 1 JACKSONVILLE, FL 32256 KING SOUTH CONDO ASSOC. 9310 OLD KINGS ROAD S. JACKSONVILLE, FL 32257

Current Mailing Address:

PROPERTY SERVICES INC 8641 BAYPINE RD., SUITE 1 JACKSONVILLE, FL 32256 New Mailing Address: 7400 BAYMEADOWS WAY SUITE 317

JACKSONVILLE, FL 32256

FEI Number: 59-3756115 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:

PROPERTY SERVICES, INC 8641 BAYPINE RD SUITE 1 JACKSONVILLE, FL 32256 US COMMUNITY MANAGEMENT CONCEPTS, INC. 7400 BAYMEADOWS WAY

SUITE 317

JACKSONVILLE, FL 32256 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: SHERRILL SCHAFER

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete

 Name:
 CORDELL, TERRY

 Address:
 9310 OLD KINGS RD., #403

 City-St-Zip:
 JACKSONVILLE, FL 32257

 Title:
 S
 () Delete

 Name:
 BRADDOCK, DEBRA

 Address:
 9310 OLD KINGS RD., #1901

 City-St-Zip:
 JACKSONVILLE, FL 32257

Title: () Delete

Name: Address: City-St-Zip: Title: PRES (X) Change () Addition Name: CORDELL, TERRY

Name: CORDELL, TERRY

Address: 9310 OLD KINGS ROAD S., #403 City-St-Zip: JACKSONVILLE, FL 32257

Title: SEC (X) Change () Addition

Name: BRADDOCK, DEBRA

Address: 9310 OLD KINGS ROAD S., #1901 City-St-Zip: JACKSONVILLE, FL 32257

Title: DIR () Change (X) Addition

Name: GELMAN, STANLEY
Address: 9310 OLD KINGS ROAD S., #101

City-St-Zip: JACKSONVILLE, FL 32257

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: SHERRILL SCHAFER PRES 03/20/2009