2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: __- «

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 10, 2004 8:00 am Secretary of State DOCUMENT # N08815 1. Entity Name 02-10-2004 90001 028 ****61.25 KENNEDY POINT CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 167 P.O. BOX 167 4747 SOUTH WASHINGTON TITUSVILLE FL 32780 4747 SOUTH WASHINGTON TITUSVILLE FL 32780 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-2546397 Not Applicable Zip Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CALDERWOOD, JOE P. Street Address (P.O. Box Number is Not Acceptable) 918 S. WASHINGTON AVE. TITUSVILLE FL 32780 City Zip Code 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 agen SIGNATURE X istered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Change ☐ Addition TITLE ☐ Delete TITLE WALTER, ELLEN WALTER, ELLEN NAME NAME 4747 S WASHINGTON AVE #131 4747 S WASHINGTON AVE #131 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 32780 TINS VILLE, FL 32780 CITY-ST-ZIP City-ST-ZIP SD TD Change ☐ Addition ☐ Delete TITLE TITLE RICHARDS, JAMES RICHARDS, JAMES NAME NAME 4747 5. WASHINGTON AVE # 135 4747 S WASHINGTON AVE #135 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 32780 TITUSVILLE, FL 32780 CITY-ST-ZIP CITY-ST-ZIP PD TITLE - Delete TITLE Change ☐ Addition DEUEL. DANIEL NAME NAME 4747 S WASHINGTON AVE #114 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 32780 CITY-ST-ZIP CITY-ST-ZIP VPD ☐ Addition TITLE ☐ Delete TITLE ☐ Change BRADLEY, LINDA NAME NAME 4747 S WASHINGTON AVE #146 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 32780 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE HOYTEN, CORNELIUS V NAME 4747 S WASHINGTON AVE #161 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 32780 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

DANIEL DELLEL, Ausident 2/4/04 3213851582

FILED