## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N18223

FILED Apr 17, 2007 Secretary of State

Entity Name: KALMIA RECREATION ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7300 PARK ST. SEMINOLE, FL 33777 US **Current Mailing Address: New Mailing Address:** 7300 PARK ST. SEMINOLE, FL 33777 US FEI Number: 59-2776408 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: REINHARDT, DEBBIE C/O RESOURCE PROPERTY MGNT 7300 PARK ST. SEMINOLE, FL 33777 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ABARE, DONALD Name: Name: 1235 S. HIGHLAND AVE #205D Address: Address: City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: Title: PD () Delete Title: PD (X) Change ( ) Addition CAFFREY, PHYLLIS Name: LORNE, PAGE Name: Address: 1235 S. HIGHLAND AV #106B Address: 1235 S. HIGHLAND AV #1305 City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: CLEARWATER, FL 33756 Title: DST () Delete Title: () Change () Addition PELKEY, RON Name: Name: 1235 S HIGHLAND AVE, #706E Address: Address: City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: Title: DVP () Delete Title: () Change () Addition Name: PROUD, JIM Name: 1235 S. HIGHLAND AV #608E Address: Address: City-St-Zip: CLEARWATER, FL 33756 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition GRIFFITH, KATHARINE VALCHICH, STAN Name: Name: 1235 S. HIGHLAND AVE. 107C 1235 S. HIGHLAND AVE. 3208 Address: Address: City-St-Zip: CLEARWATER, FL City-St-Zip: CLEARWATER, FL Title: () Delete Title: (X) Change ( ) Addition TRUSKOWSKI, CAROL PAGE, LORNE Name: Name: Address: 1235 S. HIGHLAND AVE #305A Address: 1235 S. HIGHLAND AVE #7401 CLEARWATER, FL 33756 CLEARWATER, FL 33756 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LORNE PAGE P 04/17/2007