2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34120

FILED Mar 21, 2008 Secretary of State

Entity Name: KIPPS COLONY II CONDOMINIUM ASSOCIATION, INC.

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

6240 KIPPS COLONY COURT 5901 SUN BLVD GULFPORT, FL 33707 US SUITE 200

ST, PETERSBURG, FL 33715

Current Mailing Address: New Mailing Address:

5901 SUN BLVD STE 200

ST PETERSBURG, FL 33715 US

FEI Number: 59-2911787 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:

RESOURCE PROPERTY MANAGEMENT 5901 SUN BLVD SUITE 200 SAINT PETERSBURG, FL 33715 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 (X) Change () Addition ROTENBERG, NORMAN MEGAN, KNIGHTON Name: Name:

6240 KIPPS COLONY COURT #303 Address: 6250 KIPPS COLONY COURT #202 Address:

GULFPORT, FL 33707 City-St-Zip: City-St-Zip: GULFPORT, FL 33707

Title: Title: () Delete (X) Change () Addition

PARK, PAULA Name: RAY, OLSEN Name: Address: 6250 KIPPS COLONY CT. #101 Address: 6260 KIPPS COLONY CT. #105

City-St-Zip: SAINT PETERSBURG, FL 33707 City-St-Zip: SAINT PETERSBURG, FL 33707

Title: () Delete Title: (X) Change () Addition

KNIGHTON, MEGAN PAULA, PARK Name: Name: 6250 KIPPS COLONY CT #101 Address:

6250 KIPPS COLONY CT #202 Address: GULFPORT, FL 33707 City-St-Zip: GULFPORT, FL 33707

City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: RASULIS, RICHARD Name: 6260 KIPPS COLONY CT #104 Address: Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

OLESEN, RAY OLUVIC, MARK Name: Name:

6260 KIPPS COLONY CT 105 6240 KIPPS COLONY CT 304 Address: Address: GULFPORT, FL 33707 GULFPORT, FL 33707 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: CAROL SHIER MGR 03/21/2008

Electronic Signature of Signing Officer or Director

Date