2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001538

FILED Jan 13, 2010 Secretary of State

Entity Name: ONE KINGFISH CONDOMINIUM ASSOCIATION, INC.

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

1 19TH AVE. 1 19TH AVE

INDIAN ROCKS BEACH, FL 33785 US UNIT 3

INDIAN ROCKS BEACH, FL 33785 US

Current Mailing Address: New Mailing Address:

1 19TH AVE. 1 19TH AVE.

UNIT IV UNIT 3

INDIAN ROCKS BEACH, FL 33785 INDIAN ROCKS BEACH, FL 33785

FEI Number: 59-3249963 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:

HAWKINS, MARY LYNNE
ONE 19TH AVE.
ONE 19TH AVE.
ONE 19TH AVE.

UNIT III UNIT III

INDIAN ROCKS BEACH, FL 33785 US INDIAN ROCKS BEACH, FL 33785 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: MARY LYNNE HAWKINS 01/13/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

Name: SMOAK, HENRY E III Address: ONE 19TH AVE UNIT IV

City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: DP

Name: FADY, JULIE
Address: ONE 19TH AVE. UNIT I

City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: D

Name: HAWKINS, MARY LYNNE Address: ONE 19TH AVE UNIT III

City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: ST

Name: SMOAK, KERRI Address: ONE 19TH AVE UNIT IV

City-St-Zip: INDIAN ROCKS BEACH, FL 33785

I hereby 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 all other like empowered.

SIGNATURE: MARY LYNNE HAWKINS D 01/13/2010