

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003220

FILED
Feb 19, 2004
Secretary of State**Entity Name:** KELLY PLANTATION COMMERCIAL ASSOCIATION, INC.**Current Principal Place of Business:**4393 COMMONS DRIVE EAST
DESTIN, FL 325413456 US**New Principal Place of Business:****Current Mailing Address:**4393 COMMONS DRIVE EAST
DESTIN, FL 325413456 US**New Mailing Address:****FEI Number:** 80-0031499**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HALL, STEVEN K
36468 EMERALD COAST PKWY
SUITE 2101
DESTIN, FL 325413723 US**Name and Address of New Registered Agent:**

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:

Title: DP () Delete
Name: MCNEIL, JOHN A JR
Address: 4502 OLDE PLANTATION PL
City-St-Zip: DESTIN, FL 325413425 US

Title: DV () Delete
Name: RUNNELS, DAVAGE J JR
Address: 4342 CARRIAGE LN
City-St-Zip: DESTIN, FL 325413453 US

Title: DST () Delete
Name: KLINE, TOM
Address: 220 MATTIES WAY
City-St-Zip: DESTIN, FL 325413421 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: MCNEIL, J. GARETT
Address: 390 TERRAPIN TRCE
City-St-Zip: DESTIN, FL 32541 US

Title: S () Change (X) Addition
Name: BLOCKER, TRACIE M
Address: 573 AVALON BLVD
City-St-Zip: DESTIN, FL 32541

Title: VT () Change (X) Addition
Name: SMITHER, ROBERT M
Address: 4598 NAUTICAL COURT
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JR JOHN A MCNEIL

DP

02/19/2004

Electronic Signature of Signing Officer or Director

Date