2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000003220

Entity Name: KELLY PLANTATION COMMERCIAL ASSOCIATION, INC.

FILED Apr 30, 2003 Secretary of State

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

34851 EMERALD COAST PKWY 4393 COMMONS DRIVE EAST SUITE 150 DESTIN, FL 325413456 US

DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

34851 EMERALD COAST PKWY 4393 COMMONS DRIVE EAST SUITE 150 DESTIN, FL 325413456 US

DESTIN, FL 32541

FEI Number: 80-0031499 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HALL, STEVEN K
36468 EMERALD COAST PKWY
SUITE 2101

HALL, STEVEN K
36468 EMERALD COAST PKWY
SUITE 2101

DESTIN, FL 32541 US DESTIN, FL 325413723 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: 04/30/2003

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: MCNEIL, JOHN A JR
Address: 4502 OLDE PLANTATION PLACE Address: 4502 OLDE PLANTATION PL

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 325413425 US

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

 Name:
 RUNNELS, DAVAGE J JR
 Name:
 RUNNELS, DAVAGE J JR

 Address:
 4320 CARRIAGE LANE
 Address:
 4342 CARRIAGE LN

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 DESTIN, FL 325413453 US

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

 Name:
 KLINE, TOM
 Name:
 KLINE, TOM

 Address:
 34851 EMERALD COAST PKWY, #150
 Address:
 220 MATTIES WAY

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 DESTIN, FL 325413421 US

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: T. W. KLINE ST 04/30/2003