


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90038 025 ****61.25

DOCUMENT # N98000006525 1. Entity Name KONA KAI GARDEN TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 355 DRIFTWOOD RD #7 DESTIN FL 32550		Mailing Address 355 DRIFTWOOD RD #7 DESTIN FL 32550			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2645041 <div style="float: right;"> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent HOPKINS, WILLIAM A 355 DRIFTWOOD RD #7 DESTIN FL 32550 <i>MIRAMAN BEACH, FL 32550</i>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <i>MIRAMAN BEACH</i> FL Zip Code <i>32550</i>				8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>[Signature]</i> 4/7/05 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HOPKINS, WILLIAM 354 DRIFTWOOD ROAD #7 DESTIN FL 32680	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>MIRAMAN BEACH, FL 32550</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELLINGER, DIANNE 354 DRIFTWOOD ROAD #8 DESTIN FL 32550	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D BIRD, KRISTOPHER T. 355 DRIFTWOOD RD #8 MIRAMAN BEACH, FL 32550	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MORGAN, DEBBIE 354 DRIFTWOOD ROAD #9 DESTIN FL 32550	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>MIRAMAN BEACH, FL 32550</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOIS, DOUGLAS 151 CALHOUN AVENUE # 106 DESTIN FL 32541	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>MIRAMAN BEACH, FL 32550</i>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WIXTED, ED PO BOX 163 HANNAWA FALLS NY 13647	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DUREN, JAMES 354 DRIFTWOOD ROAD #12 DESTIN FL 32550	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>MIRAMAN BEACH, FL 32550</i>	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <i>4/7/05</i> Daytime Phone # <i>650-2800</i>		