

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 08, 2004 8:00 am
Secretary of State

03-08-2004 90033 039 ****61.25

DOCUMENT # 727957

1. Entity Name

KILLEARN LAKES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

7110 BEECH RIDGE TR
TALLAHASSEE FL 32312
US

Mailing Address

7110 BEECH RIDGE TR
TALLAHASSEE FL 32312
US

04010006



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2751247

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TROTTMAN, BRADLEY C
7110 BEECH RIDGE TR
TALLAHASSEE FL 32312

*Trotman, Bradley C
(name spelling correction)*

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.

\$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: D REICHERT, MARK Delete
NAME: REICHERT, MARK
STREET ADDRESS: 7110 BEECH RIDGE TR
CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

TITLE: P HEIMAN, BILL Delete
NAME: HEIMAN, BILL
STREET ADDRESS: 7110 BEECH RIDGE TR
CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

TITLE: T THOMA, RICHARD E Delete
NAME: THOMA, RICHARD E
STREET ADDRESS: 7110 BEECH RIDGE TRAIL
CITY-ST-ZIP: TALLAHASSEE FL

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

TITLE: VP STEPHENSON, JIM Delete
NAME: STEPHENSON, JIM
STREET ADDRESS: 7110 BEECH RIDGE TR
CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

TITLE: D KING, DAN Delete
NAME: KING, DAN
STREET ADDRESS: 7110 BEECH RIDGE TRAIL
CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

TITLE: D TURNER, CYNTHIA Delete
NAME: TURNER, CYNTHIA
STREET ADDRESS: 7110 BEECH RIDGE TRAIL
CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: Change Addition
CITY-ST-ZIP: Change Addition

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: ✓

Richard E. Thoma
Richard E. Thoma, Treasurer

OFFICER OR DIRECTOR

3/5/04

Date

Daytime Phone #