

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 19, 2003 8:00 am
Secretary of State

06-19-2003 90044 007 ****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**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2751247**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**BIRSCHBACH, THOMAS M
7110 BEECH RIDGE TR
TALLAHASSEE FL 32312**

7. Name and Address of New Registered Agent
Name **Bradley C. Trotman**
Street Address (P.O. Box Number is Not Acceptable)
7110 Beech Ridge Trail
City **Tallahassee** FL Zip Code **32312**

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 *Bradley C. Trotman*
Signature, typed or printed name of registered agent and title if applicable.
Bradley C. Trotman

(NOTE: Registered Agent signature required when reinstating)
DATE **6-17-2003**

FILE NOW: FEE IS \$61.25

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 **VP** Delete
NAME **MCCUE, TERRY**
STREET ADDRESS **7110 BEECH RIDGE TR**
CITY-ST-ZIP **TALLAHASSEE FL 32312**

TITLE **D** Change Addition
NAME **Mark Reichert**
STREET ADDRESS **7110 Beech Ridge Trail**
CITY-ST-ZIP **Tallahassee, FL 32312**

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

TITLE **Sec** Change Addition
NAME **Hillard Goldsmith, III**
STREET ADDRESS **7110 Beech Ridge Trail**
CITY-ST-ZIP **Tallahassee, FL 32312**

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

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE **VP** Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** Delete
NAME **WRIGHT, MIKE**
STREET ADDRESS **7110 BEECH RIDGE TRAIL**
CITY-ST-ZIP **TALLAHASSEE FL 32312**

TITLE **D** Change Addition
NAME **Dan King**
STREET ADDRESS **7110 Beech Ridge Trail**
CITY-ST-ZIP **Tallahassee, FL 32312**

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

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **SIGNATURE REQUIRED**

Richard E. L... **6/19/03 850-668-3231**

CR2E037 (10/02)