

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765634

FILED  
Feb 19, 2012  
Secretary of State

**Entity Name:** KANUGA VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2398 TEMPLE LANE  
ST. CLOUD, FL 34769 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 700434  
ST. CLOUD, FL 34770 US

**New Mailing Address:**

FEI Number: 59-2894470

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRUEGGEMANN, DAVID  
2398 TEMPLE LN  
ST CLOUD, FL 34769 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: T  
Name: RAFFEN, JOYCE MRS  
Address: 2030 CRYSTAL LN  
City-St-Zip: SAINT CLOUD, FL 34769

Title: D  
Name: BANEY, KATHY MRS  
Address: 2055 BRAMBLEWOOD DR  
City-St-Zip: SAINT CLOUD, FL 34769

Title: S  
Name: ARREOLA, KAREN MRS  
Address: 2000 CRYSTAL LN  
City-St-Zip: SAINT CLOUD, FL 34769

Title: VP  
Name: SHAUGER, ROY MR.  
Address: 1175 LIZA STREET  
City-St-Zip: SAINT CLOUD, FL 34771

Title: D  
Name: SHAUGER, MARYANN MRS  
Address: 1175 LIZA ST  
City-St-Zip: SAINT CLOUD, FL 34771

Title: D  
Name: NOFTZ, PEGGY MRS  
Address: 2073 BRAMBLEWOOD DRIVE  
City-St-Zip: SAINT CLOUD, FL 34769

I hereby 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 all other like empowered.

SIGNATURE: KAREN ARREOLA

SECR

02/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date