


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90075 005 ****61.25

DOCUMENT # N92000000207		
1. Entity Name KINGS LANDING HOMEOWNERS ASSOCIATION, INC.		

Principal Place of Business 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637 US	Mailing Address 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.

Suite, Apt. #, etc.

01042007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-3244681

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

**DUARTE, ANTONIO III
6221 LAND O' LAKES BLVD.
LAND O LAKES, FL 34639**

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

**Filing Fee is \$61.25
Due by May 1, 2007**

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

TITLE	DS	<input type="checkbox"/> Delete
NAME	MELLOR, DAVID	
STREET ADDRESS	4349 BIRDSONG BLVD	
CITY-ST-ZIP	LUTZ, FL 33559	

TITLE	DP	<input type="checkbox"/> Delete
NAME	MAGGERT, KEN	
STREET ADDRESS	4325 BIRDSONG BLVD.	
CITY-ST-ZIP	LUTZ, FL 335598520	

TITLE	DS	<input checked="" type="checkbox"/> Delete
NAME	FORRY, CHARLES	
STREET ADDRESS	4411 BIRDSONG BLVD.	
CITY-ST-ZIP	LUTZ, FL 335598520	

TITLE	DT	<input type="checkbox"/> Delete
NAME	BRAMHALL, GREG	
STREET ADDRESS	4632 BIRDSONG BLVD	
CITY-ST-ZIP	LUTZ, FL 33559	

TITLE	VP	<input type="checkbox"/> Delete
NAME	CHARLES, FORRY	
STREET ADDRESS	4411 BIRDSONG BLVD	
CITY-ST-ZIP	LUTZ, FL 33559	

TITLE	D	<input type="checkbox"/> Delete
NAME	WOMACK, Richard	
STREET ADDRESS	26912 Carmen	
CITY-ST-ZIP	Lutz, Fla.	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAME	
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAME	
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DVP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COYNE, Matthew	
STREET ADDRESS	4530 Birdsong Blvd	
CITY-ST-ZIP	Lutz, FL 33559	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAME	
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAME	
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth Maggert

Date

Daytime Phone #

1-16-07 (813) 991-5308