2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04592

Entity Name: KING'S COLONY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

12724 GRAN BAY PARKWAY W SUITE 410 JACKSONVILLE, FL 32258

Current Mailing Address:

12724 GRAN BAY PARKWAY W SUITE 410 JACKSONVILLE, FL 32258 US

FEI Number: 59-2641233

Name and Address of Current Registered Agent:

PROPERTY ADVISORS MANAGEMENT 12724 GRAN BAY PARKWAY W SUITE 410 JACKSONVILLE, FL 32258 US

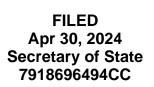
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: WILLIAM HONAN			04/30/2024 Date
	Electronic Signature of Registered Agent			
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	VP	
Name	GULLETT, RAY	Name	HALL, AVARAE	
Address	12724 GRAN BAY PARKWAY W SUITE 410	Address	12724 GRAN BAY PARKWAY V SUITE 410	V
City-State-Zip:	JACKSONVILLE FL 32258	City-State-Zip:	JACKSONVILLE FL 32258	
Title	SECRETARY	Title	TREASURER	
Name	VECCHIA, LUCIO	Name	TRIZIS, MARLENE	
Address	12724 GRAN BAY PARKWAY W SUITE 410	Address	12724 GRAN BAY PARKWAY V SUITE 410	V
City-State-Zip:	JACKSONVILLE FL 32258	City-State-Zip:	JACKSONVILLE FL 32258	
Title	SECRETARY	Title	DIRECTOR-SEAT 5	
Name	VECCHIA, LUCIA DELLA	Name	NORTH, ALLIX	
Address	12724 GRAN BAY PARKWAY W SUITE 410	Address	12724 GRAN BAY PARKWAY V SUITE 410	V
City-State-Zip:	JACKSONVILLE FL 32258	City-State-Zip:	JACKSONVILLE FL 32258	
Title	DIRECTOR-SEAT 6	Title	DIRECTOR - 7	
Name	VANDENBURG, CAROL A	Name	NEUMULLER, ELIZABETH A	
Address	12724 GRAN BAY PARKWAY W SUITE 410	Address	12724 GRAN BAY PARKWAY V SUITE 410	V
City-State-Zip:	JACKSONVILLE FL 32258	City-State-Zip:	JACKSONVILLE FL 32258	

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.

PRESIDENT

SIGNATURE: RAY GULLETT



Certificate of Status Desired: No

04/30/2024 Date