

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 730837

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Entity Name:** KNOWLBOURNE SQUARE ASSOCIATION, INC.

**Current Principal Place of Business:**

199 E WELBOURNE AVE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

199 E WELBOURNE AVE  
WINTER PARK, FL 32789

**New Mailing Address:**

**FEI Number:** 59-1719145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ODAHOWSKI, DAVID A.  
199 E. WELBOURNE AVENUE  
WINTER PARK, FL 32789 US

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

HUTCHESON, MARY  
199 E. WELBOURNE AVENUE  
WINTER PARK, FL 32789 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: MARY ELLEN HUTCHESON

03/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ODAHOWSKI, DAVID A  
Address: 199 E WELBOURNE AVE  
City-St-Zip: WINTER PARK, FL 32789

Title: VP  
Name: PRICE, ALAN D  
Address: 199 E. WELBOURNE AVE.  
City-St-Zip: WINTER PARK, FL 32789

Title: T  
Name: HUTCHESON, MARY E  
Address: 199 E. WELBOURNE AVE.  
City-St-Zip: WINTER PARK, FL 32789

Title: S  
Name: HESSLER, DEBORAH J  
Address: 199 E. WELBOURNE AVE.  
City-St-Zip: WINTER PARK, FL 32789

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: MARY E. HUTCHESON

T

03/29/2011

Electronic Signature of Signing Officer or Director

Date