

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742175

FILED
Apr 19, 2004
Secretary of State

Entity Name: KINGSLEY LAKE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6110 KINGSLEY LAKE DR.
STARKE, FL 320916712

New Principal Place of Business:

Current Mailing Address:

6110 KINGSLEY LAKE DR.
STARKE, FL 320916712

New Mailing Address:

FEI Number: 59-1860841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHEE, W.E.
3610 N.W. 29TH TERRACE
GAINESVILLE, FL 32605

Name and Address of New Registered Agent:

MURPHEE, W.E.
6608 PAHOKEE CT
STARKE, FL 32091

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: _____

04/19/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TOWNSEND, STRICKLAND
Address: 6250 KINGSLEY LAKE DR
City-St-Zip: STARKE, FL 32091

Title: D () Delete
Name: ANDURS, PAUL
Address: 6209 KINGSLEY LAKE DRIVE
City-St-Zip: STARKE, FL 32091

Title: T () Delete
Name: ANDRUS, ANN
Address: 6209 KINGSLEY LAKE DR
City-St-Zip: STARKE, FL 32091

Title: D (X) Delete
Name: MURPHREE, W.E.
Address: 3610 NW 29TH TERR
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MURPHREE, DUB
Address: 6608 PAHOKEE CT
City-St-Zip: STARKE, FL 32091

Title: D (X) Change () Addition
Name: TOWNSEND, STRICKLAND
Address: 6529 KINGSLEY LAKE DRIVE
City-St-Zip: STARKE, FL 32091

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ANN ANDRUS

T

04/19/2004

Electronic Signature of Signing Officer or Director

Date