

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742175

FILED
Apr 13, 2009
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:

HENDRICKS, JOANN
6306 BLANDING AVE.
STARKE, FL 32091 US

Name and Address of New Registered Agent:

MURPHREE, WALTER
6608 PAHOKEE CT
STARKE, FL 32091 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: WALTER E MURPHREE

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: GARLINGTON, JIM
Address: 4302 SW 82ND TERR
City-St-Zip: GAINESVILLE, FL 32608

Title: T () Delete
Name: HENDRICKS, JOANN
Address: 6306 BLANDING AVE.
City-St-Zip: STARKE, FL 32091

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: WALTER E MURPHREE

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date