


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 12, 2005 8:00 am**  
**Secretary of State**

01-12-2005 90011 018 \*\*\*\*61.25

<b>DOCUMENT # 747101</b>			
1. Entity Name KINGS CREEK VILLAGE TOWNHOUSE ASSOCIATION, INC.			
Principal Place of Business INC. 8333 S.W. 81 AVENUE MIAMI, FL 33143		Mailing Address INC. 8333 S.W. 81 AVENUE MIAMI, FL 33143	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
KUPERMAN, MARC A ESQUIER OFFICES AT PINECREST 7695 SW 104 STREET, SUITE 210 MIAMI, FL 33156		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD <input checked="" type="checkbox"/> Delete	TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LLOYD, JAMES	NAME	SMART, JAMES G.
STREET ADDRESS	8206 SW 82 CT	STREET ADDRESS	8112 SW 83 ST MIAMI FL 33143
CITY-ST-ZIP	MIAMI, FL 33143	CITY-ST-ZIP	MIAMI FL 33143
TITLE	VPD <input checked="" type="checkbox"/> Delete	TITLE	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMART, JAMES	NAME	DUPREE, LEE P.
STREET ADDRESS	8112 SW 83 ST.	STREET ADDRESS	8207 SW 81 PL
CITY-ST-ZIP	MIAMI, FL 33143	CITY-ST-ZIP	MIAMI FL 33143
TITLE	SD <input checked="" type="checkbox"/> Delete	TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEINLY, KATHY	NAME	TERJESEN, SHARON
STREET ADDRESS	8206 SW 81 CT	STREET ADDRESS	8108 SW 83 ST
CITY-ST-ZIP	MIAMI, FL 33143	CITY-ST-ZIP	MIAMI, FL 33143
TITLE	TD <input checked="" type="checkbox"/> Delete	TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KAPLAN, JEFFREY	NAME	CAPPS, DORIS J.
STREET ADDRESS	8208 SW 81 TERR.	STREET ADDRESS	8124 SW 83 ST
CITY-ST-ZIP	MIAMI, FL 33143	CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUPREE, LEE P	NAME	AVELLO, RICARDO
STREET ADDRESS	8207 SW 81 PL	STREET ADDRESS	8122 SW 83 ST MIAMI, FL 33143
CITY-ST-ZIP	MIAMI, FL 33143	CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRELL, BETTY	NAME	McKNIGHT, JANET
STREET ADDRESS	8215 SW 82 PL	STREET ADDRESS	8122 SW 82 CT
CITY-ST-ZIP	MIAMI, FL 33143	CITY-ST-ZIP	MIAMI, FL 33143
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Sharon Terjesen</i>		SHARON TERJESEN	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #
			305-596-0176

20001665



01062005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-1981170 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required