

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747101

FILED
Apr 03, 2009
Secretary of State

Entity Name: KINGS CREEK VILLAGE TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

INC.
8333 S.W. 81 AVENUE
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

INC.
8333 S.W. 81 AVENUE
MIAMI, FL 33143

New Mailing Address:

FEI Number: 59-1981170

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUPERMAN, MARC A ESQUIER
OFFICES AT PINECREST
7695 SW 104 STREET, SUITE 210
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MURPHY, WILLIAM F
Address: 8118 SW 82 CT
City-St-Zip: MIAMI, FL 33143

Title: TD () Delete
Name: KAPLAN, JEFFREY D
Address: 8208 SW 81 TERR
City-St-Zip: MIAMI, FL 33143

Title: V () Delete
Name: HENLY, KATHY
Address: 8200 SW 31 CT
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: NAGLER, MARY
Address: 8226 SW 81 CT
City-St-Zip: MIAMI, FL 33143

Title: S () Delete
Name: TERJESEN, SHERRY
Address: 8108 SW 83 ST
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: HARRELL, BETTY
Address: 8215 SW 82 PL
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LEITMAN, AMY
Address: 8205 SW 82 CT
City-St-Zip: MIAMI, FL 33143

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

Title: VPD (X) Change () Addition
Name: MANRARA, ALFREDO
Address: 8205 SW 82 CT
City-St-Zip: MIAMI, FL 33143

Title: SD (X) Change () Addition
Name: RANSFORD, LAUREL
Address: 8131 SW 81 PL
City-St-Zip: MIAMI, FL 33143

Title: DD (X) Change () Addition
Name: HARRELL, BETTY
Address: 8215 SW 82 PL
City-St-Zip: MIAMI, FL 33143

Title: DD (X) Change () Addition
Name: MORENO, IRMA
Address: 8233 SW 82 CT
City-St-Zip: MIAMI, FL 33143

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: AMY LEITMAN

PD

04/03/2009

Electronic Signature of Signing Officer or Director

Date