

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760806

FILED  
Mar 07, 2009  
Secretary of State

**Entity Name:** KALURNA KOTTAGES ASSOCIATION, INC.

**Current Principal Place of Business:**

1808 KALURNA CT  
ORLANDO, FL 32806 US

**New Principal Place of Business:**

**Current Mailing Address:**

1808 KALURNA CT  
ORLANDO, FL 32806 US

**New Mailing Address:**

**FEI Number:** 59-2946580

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EVANS, VALERIE W  
1808 KALURNA CRT  
ORLANDO, FL 32806 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: GIESSUEBEL, BRIAN  
Address: 1812 KALURNA COURT  
City-St-Zip: ORLANDO, FL 32806

Title: VPD ( ) Delete  
Name: BROWN, LYNN  
Address: 1804 KALURNA COURT  
City-St-Zip: ORLANDO, FL 32806

Title: STD ( ) Delete  
Name: EVANS, VALERIE  
Address: 1808 KALURNA COURT  
City-St-Zip: ORLANDO, FL 32806

Title: VPD (X) Delete  
Name: BROWN, LYNN  
Address: 1804 KALURNA COURT  
City-St-Zip: ORLANDO, FL 32806

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BROWN, LYNN  
Address: 1804 KALURNA COURT  
City-St-Zip: ORLANDO, FL 32806

Title: VPD (X) Change ( ) Addition  
Name: HELSBY, KATHY  
Address: 1801 KALURNA COURT  
City-St-Zip: ORLANDO, FL 32806

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 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: VALERIE W. EVANS

STD

03/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date