2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2009
Secretary of State

DOCUMENT# 766999

Entity Name: KELLWOOD VILLAGE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4205 OLD ROAD 37
#62
LAKELAND, FL 338131552

New Principal Place of Business:

Current Mailing Address:

KELLWOOD VILLAGE
4205 OLD ROAD 37, UNIT 62
LAKELAND, FL 338131552 US

New Mailing Address:

4205 OLD ROAD 37
#62
LAKELAND, FL 338131552

FEI Number: 59-2285547 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INGLE, DONNA A
4205 OLD ROAD 37
UNIT 38
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

SMITH, PATTI
4205 OLD ROAD 37
UNIT 37
LAKELAND, FL 33813 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: PATTI SMITH 03/04/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PO ( ) Delete
Name: BRYAN, THURMAN
Address: 4205 OLD RD 37 #24
City-St-Zip: LAKELAND, FL 33813

Title: SO ( ) Delete
Name: WHEELER, SHARON
Address: 4205 OLDROAD 37 UNIT 39
City-St-Zip: LAKELAND, FL 33813

Title: TO ( ) Delete
Name: INGLE, DONNA
Address: 4205 OLD ROAD 37 UNIT 38
City-St-Zip: LAKELAND, FL 338131552

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: CHESSER, LARRY
Address: 4205 OLD ROAD 37 UNIT52
City-St-Zip: LAKELAND, FL 33813

Title: VP (X) Change ( ) Addition
Name: FOX, RICHARD
Address: 4205 OLD ROAD 37 UNIT 33
City-St-Zip: LAKELAND, FL 33813

Title: SEC (X) Change ( ) Addition
Name: DEES, FAYE
Address: 4205 OLD ROAD 37 UNIT 40
City-St-Zip: LAKELAND, FL 33813

Title: TREA ( ) Change (X) Addition
Name: SMITH, PATTI
Address: 4205 OLD ROAD 37 UNIT 37
City-St-Zip: LAKELAND, FL 33813

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: PATTI SMITH TREA 03/04/2009
Electronic Signature of Signing Officer or Director — Date