

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769402

FILED
Apr 13, 2009
Secretary of State

Entity Name: KILLEARN FAIRWAYS TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

3207 SHAMROCK EAST
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

3207 SHAMROCK EAST
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 59-2313174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, CLARENCE V.
3207-22 SHAMROCK E.
TALLAHASSEE, FL 32309 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: STD () Delete
Name: SMITH, CLARENCE V
Address: 3207-22 SHAMROCK EAST
City-St-Zip: TALLAHASSEE, FL 32309

Title: VD (X) Delete
Name: BROCKETT, ANN
Address: 3207-15 SHAMROCK ST E
City-St-Zip: TALLAHASSEE, FL 32309

Title: PD () Delete
Name: SMITH, DONALD
Address: 3207-9 SHAMROCK ST E
City-St-Zip: TALLAHASSEE, FL 32309

Title: S () Delete
Name: WALKER, FRANCINE
Address: 3207-11 SHAMROCK ST E
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: SMITH, CLARENCE V
Address: 3207-22 SHAMROCK EAST
City-St-Zip: TALLAHASSEE, FL 32309

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

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

Title: SD (X) Change () Addition
Name: WALKER, FRANCINE
Address: 3207-11 SHAMROCK ST E
City-St-Zip: TALLAHASSEE, FL 32309

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: CLARENCE V. SMITH

TD

04/13/2009

Electronic Signature of Signing Officer or Director

Date