

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770694

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** KELLSMONT OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1223 KELLS COURT  
LAKE LAND, FL 338131265

**New Principal Place of Business:**

**Current Mailing Address:**

4039 CHEVERLY DR. E.  
LAKE LAND, FL 338131265 US

**New Mailing Address:**

**FEI Number:** 59-2871828

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLCOM, JIM  
1223 KELLS COURT  
LAKE LAND, FL 33813 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: D  
Name: HOLCOM, JIM  
Address: 1223 KELLS CT  
City-St-Zip: LAKE LAND, FL 33813

Title: VD  
Name: GIAMMATTEO, LENNY  
Address: 1116 KELLS COURT  
City-St-Zip: LAKE LAND, FL 33813

Title: TD  
Name: SANCHEZ, PATRICIA  
Address: 4039 CHEVERLY DR E  
City-St-Zip: LAKE LAND, FL 33813

Title: SD  
Name: PALMER, SHARON  
Address: 3930 CANYON LAKE POINT  
City-St-Zip: LAKE LAND, FL 33813

Title: D  
Name: ALLEY, PAUL  
Address: 3924 CANYON LAKE POINT  
City-St-Zip: LAKE LAND, FL 33813

Title: PD  
Name: CULLEN, JAMES  
Address: 1217 KELLS COURT  
City-St-Zip: LAKE LAND, FL 33813

I hereby 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 all other like empowered.

**SIGNATURE:** PATRICIA SANCHEZ

TREA

02/13/2012

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

\_\_\_\_\_  
Date