

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90032 011 ****61.25

DOCUMENT # 770921

1. Entity Name

**KINGSWOOD ESTATES PROPERTY OWNER'S
ASSOCIATION, INC.**



Principal Place of Business

**1440 56TH SQ. WEST
VERO BEACH FL 32966
US**

Mailing Address

**P.O. BOX 962
VERO BCH. FL 32961**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2562564

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HENDERSON, STEVE L. ATTOR
817 BEACHLAND BLVD.
VERO BEACH FL 32964**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **CARPENTER, SPENCER**
STREET ADDRESS **1561 56TH SQUARE WEST**
CITY-ST-ZIP **VERO BEACH FL 32966**

TITLE **D** ☒ Change ☐ Addition
NAME **KOULISH, DAVID**
STREET ADDRESS **1440 56TH SQ WEST**
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **D** ☒ Delete
NAME **KDULISH, DAVID**
STREET ADDRESS **1440 56TH SQUARE WEST**
CITY-ST-ZIP **VERO BEACH FL 32966**

TITLE **PRESIDENT** ☒ Change ☐ Addition
NAME **~~MICHAEL~~ BURNS, MICHAEL**
STREET ADDRESS **1570 56TH COURT**
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **SD** ☐ Delete
NAME **CARNELL, RICHARD**
STREET ADDRESS **1550 56TH COURT**
CITY-ST-ZIP **VERO BEACH FL 32966**

TITLE **TREASURER** ☐ Change ☒ Addition
NAME **KESSLER, ROBERT**
STREET ADDRESS **1430 56TH SQUARE EAST**
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **D** ☐ Delete
NAME **GIARIZZI, SALVATORE**
STREET ADDRESS **1400 56TH SQUARE WEST**
CITY-ST-ZIP **VERO BEACH FL 32966**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **TURNER, D. LEE**
STREET ADDRESS **1525 56TH COURT**
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **J** ☒ Delete
NAME **BURNS, MICHAEL J**
STREET ADDRESS **1570 56TH CT**
CITY-ST-ZIP **VERO BEACH FL 32466**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **MICHAEL J. BURNS PRESIDENT 2/10/04 772-562-6561**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #