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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandria B. Mortman,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H05719 (0)

1. Corporation Name

KINGS MANOR TENANTS' ASSOCIATION, INC.

Principal Place of Business

1399 SOUTH BELCHER ROAD
#352
LARGO FL 34641

Mailing Address

1399 SOUTH BELCHER ROAD
#352
LARGO FL 34641

2. Principal Place of Business

2a. Mailing Address

21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

THOMAS E. FOUGHT
1399 S BELCHER RD
#40
LARGO FL 34641

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

James Pettitt

VICE PRESIDENT + REGISTERED AGENT.

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	FOUGHT, THOMAS E.	
STREET ADDRESS	1399 S. BELCHER RD. #40	
CITY-STATE-ZIP	LARGO FL	
TITLE	VD	DELETE
NAME	CAROL JURIGA	
STREET ADDRESS	1399 S BELCHER RD #183	
CITY-STATE-ZIP	LARGO FL 34641	
TITLE	SD	DELETE
NAME	JEAN CHERRY	
STREET ADDRESS	1399 S BELCHER RD #79	
CITY-STATE-ZIP	LARGO FL 34641	
TITLE	TD	DELETE
NAME	KELLY, WILLIAM	
STREET ADDRESS	1399 S BELCHER RD #126	
CITY-STATE-ZIP	LARGO FL 34641	
TITLE	T	DELETE
NAME	DENNIS ARBOR	
STREET ADDRESS	1399 S BELCHER RD #124	
CITY-STATE-ZIP	LARGO FL 34641	
TITLE	T	DELETE
NAME	MURIEL BAILEY	
STREET ADDRESS	1399 S BELCHER RD #284	
CITY-STATE-ZIP	LARGO FL 34641	

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Change	Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-ZIP		
5. TITLE	Change	Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE	Change	Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE	Change	Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE	Change	Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		
21. TITLE	Change	Addition
22. NAME		
23. STREET ADDRESS		
24. CITY-STATE-ZIP		
25. TITLE	Change	Addition
26. NAME		
27. STREET ADDRESS		
28. CITY-STATE-ZIP		
29. TITLE	Change	Addition
30. NAME		
31. STREET ADDRESS		
32. CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas E. Fought

(813) 535-9070

CR2E034 (12/95)