

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004281

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: KINJA BAY HOMEOWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

60 E GULF BEACH DR  
ST GEORGE ISLAND, FL 32328

## New Principal Place of Business:

1129 E GULF BEACH DR  
ST GEORGE ISLAND, FL 32328

## Current Mailing Address:

60 E GULF BEACH DR  
ST GEORGE ISLAND, FL 32328

## New Mailing Address:

P O BOX 876  
EASTPOINT, FL 32328

FEI Number: 94-3417381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COLLINS, ALICE D  
60 E GULF BEACH DR  
C/O COLLINS VACATION RENTALS, INC  
ST GEORGE ISLAND, FL 32328 US

## Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT SERVICES  
1914 SUNSET DRIVE  
ST GEORGE ISLAND, FL 32328 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: WAYNE M GLEASMAN

04/28/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: LIPSCOMB, LATICIA F  
Address: 60 EAST GULF BEACH DRIVE  
City-St-Zip: ST. GEORGE ISLAND, FL 32328

Title: PD ( ) Delete  
Name: FANN, ELLIOTT  
Address: 8 TROTTER WAY  
City-St-Zip: VALDOSTA, GA 31605

Title: VD ( ) Delete  
Name: GILLSON, BUNNY  
Address: 1051 EAGLE'S BROOK DRIVR  
City-St-Zip: LOCUST GROVE, GA 30248

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DTS (X) Change ( ) Addition  
Name: GLEASMAN, WAYNE M  
Address: 431 MCCLOUD ST  
City-St-Zip: ST. GEORGE ISLAND, FL 32328

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

Title: VD (X) Change ( ) Addition  
Name: GILLSON, BUNNY  
Address: 1051 EAGLE'S BROOK DRIVE  
City-St-Zip: LOCUST GROVE, GA 30248

I hereby certify that the information supplied with this filing does not qualify for the 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: WAYNE M GLEASMAN

DTS

04/28/2006

Electronic Signature of Signing Officer or Director

Date