

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004281

FILED
Apr 26, 2007
Secretary of State

Entity Name: KINJA BAY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1129 E GULF BEACH DR
ST GEORGE ISLAND, FL 32328

New Principal Place of Business:

Current Mailing Address:

P O BOX 876
EASTPOINT, FL 32328

New Mailing Address:

FEI Number: 94-3417381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT SERVICES
1914 SUNSET DRIVE
ST GEORGE ISLAND, FL 32328 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: DTS () Delete
Name: GLEASMAN, WAYNE M
Address: 431 MCCLOUD ST
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 DRIVE
City-St-Zip: LOCUST GROVE, GA 30248

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: FANN, ELLIOTT
Address: 8 TROTTER WAY
City-St-Zip: VALDOSTA, GA 31605

Title: V (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 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

T/S

04/26/2007

Electronic Signature of Signing Officer or Director

Date