2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N03000002148

Entity Name: TOWNHOMES OF KINGS LAKE HOA, INC.

Current Principal Place of Business:

1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765

New Principal Place of Business:

24701 US HIGHWAY 19 N SUITE #102
CLEARWATER, FL 33763

Current Mailing Address:

PO BOX 14357
CLEARWATER, FL 33766

New Mailing Address:

FEI Number: 20-0469397 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERI-TECH REALTY, INC.
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

AMERI-TECH REALTY, INC.
24701 US HIGHWAY 19 N SUITE #102
CLEARWATER, FL 33763 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: MICHAEL G PEREZ, PRESIDENT 03/27/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FREDRICKSON, DONNA
Address: 6755 LAKE ROCHESTER LANE
City-St-Zip: GIBSONTON, FL 33534

Title: VP ( ) Delete
Name: ROSS, CARMEN
Address: 6747 LAKE ROCHESTER LANE
City-St-Zip: GIBSONTON, FL 33534

Title: T ( ) Delete
Name: GARBAJ, SALA
Address: 13123 KINGS CROSSING DRIVE
City-St-Zip: GIBSONTON, FL 33534

Title: S ( ) Delete
Name: GRABLE, JENAE
Address: 13119 KINGS CROSSING DR
City-St-Zip: GIBSONTON, FL 33534

Title: SGT (X) Delete
Name: MCCASLAND, JAMIE
Address: 12829 KINGS CROSSING DR
City-St-Zip: GIBSONTON, FL 33534

Title: D ( ) Delete
Name: BENNETT, JASON
Address: 12966 KINGS CROSSING DRIVE
City-St-Zip: GIBSONTON FL, 33 33534

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: DONNA FREDRICKSON P 03/27/2009
Electronic Signature of Signing Officer or Director Date