

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007172

FILED
Jan 29, 2007
Secretary of State

Entity Name: KINGSTON COURT TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 3952
SAINT PETERSBURG, FL 33731 US

New Principal Place of Business:

319 8TH AVE NORTH
SAINT PETERSBURG, FL 33701 US

Current Mailing Address:

PO BOX 3952
SAINT PETERSBURG, FL 33731 US

New Mailing Address:

FEI Number: 20-2258189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COOVERT, DALE LEE
319 8TH AVE N.
SAINT PETERSBURG, FL 33701 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: PD () Delete
Name: COOVERT, DALE L
Address: 319 8TH AVE. NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701 US

Title: STD () Delete
Name: JORDAN, DOYLE
Address: 307 8TH AVE. NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701 US

Title: VD () Delete
Name: PERRARS, ROSEMARY
Address: 311 8TH AVE. NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: JOURDAN, DOYLE
Address: 307 8TH AVE. NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701 US

Title: VD (X) Change () Addition
Name: PERRARS, ROSEMARY
Address: 311 8TH AVE. NORTH
City-St-Zip: SAINT PETERSBURG, FL 33701 US

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: DALE LEE COOVERT

PD

01/29/2007

Electronic Signature of Signing Officer or Director

Date