

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001737

FILED  
Mar 25, 2009  
Secretary of State

**Entity Name:** KINGS ROW TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

124-128 GLEASON STREET  
DELRAY BEACH, FL 33483 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O KATHY DESILETS  
20 WORSCHESTER RD BOX 73  
PRINCETON, MA 01541 US

**New Mailing Address:**

**FEI Number:** 20-0944858      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TILLEY, MICHAEL R  
2000 GLADES ROAD  
SUITE 306  
BOCA RATON, FL 33431 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: D ( ) Delete  
Name: DESILETS, KATHY MRS  
Address: 20 WORCHESTER RD BOX 73  
City-St-Zip: PRINCETON, MA 01541 US

Title: PD ( ) Delete  
Name: RAMSEY, DOUGLAS DR  
Address: 8782 S MADISON AVE  
City-St-Zip: INDIANAPOLIS, IN 64227 US

Title: D ( ) Delete  
Name: SALL, DAGMAR MS  
Address: 7274 NOTTINGHILL LANE  
City-St-Zip: CINCINNATI, OH 42455 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: RAMSEY, DOUGLAS DR  
Address: 8782 S MADISON AVE  
City-St-Zip: INDIANAPOLIS, IN 64227 US

Title: PD (X) Change ( ) Addition  
Name: SALL, DAGMAR MS  
Address: 7274 NOTTINGHILL LANE  
City-St-Zip: CINCINNATI, OH 42455 US

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: DAGMAR SALL

PD

03/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date