2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 02, 2009
Secretary of State

DOCUMENT# N08942

Entity Name: KINGS AND QUEENS HOMEOWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

2808 N FLORIDA AVE
LAKELAND, FL 33805 US

New Principal Place of Business:

Current Mailing Address:

256 QUEEN MARY LOOP
LAKELAND, FL 33805 US

New Mailing Address:

437 KIND EDWARD AVENUE
LAKELAND, FL 33805 US

FEI Number: 59-2665364 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WILLIAMS, ERNIE
9234 QUEEN MARY LOOP
LAKELAND, FL 33805 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:	P	( ) Delete
Name:	WILLIAMS, ERNIE	
Address:	234 QUEEN MARY LOOP	
City-St-Zip:	LAKELAND, FL 33805	
Title:	DV	( ) Delete
Name:	SHARE, ROBERT	
Address:	291 QUEEN MARY LOOP	
City-St-Zip:	LAKELAND, FL 33805	
Title:	T	(X) Delete
Name:	FITZPARTRICK, NELSON K	
Address:	210 QUEEN MARY LOOP	
City-St-Zip:	LAKELAND, FL 33805	
Title:	S	(X) Delete
Name:	WORTHINGTON, MARGARET	
Address:	256 QUEEN MARY LOOP	
City-St-Zip:	LAKELAND, FL 33805	
Title:	D	(X) Delete
Name:	STAIB, EUGENE	
Address:	450 KING EDWARD AVE	
City-St-Zip:	LAKELAND, FL 33805	
Title:	D	( ) Delete
Name:	LIBERATORE, VINCENT	
Address:	364 QUEEN MARY LOOP	
City-St-Zip:	LAKELAND, FL 33805	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	T	(X) Change ( ) Addition
Name:	BARFIELD, BETTY	
Address:	437 KING EDWARD AVENUE	
City-St-Zip:	LAKELAND, FL 33805	
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: BETTY BARFIELD T 07/02/2009

Electronic Signature of Signing Officer or Director — Date