

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000005403

**FILED**  
**Jul 18, 2012**  
**Secretary of State**

**Entity Name:** KNIGHT LAKE ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

529 VERSAILLES DR SUITE 200  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

529 VERSAILLES DR SUITE 200  
MAITLAND, FL 32751

**New Mailing Address:**

**FEI Number:** 61-1688162

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DETWEILER, DAVID  
529 VERSAILLES DR SUITE 200  
MAITLAND, FL 32751 US

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

DETWEILER, MAYLINDA  
529 VERSAILLES DR SUITE 200  
MAITLAND, FL 32751 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: MAYLINDA DETWEILER

07/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SINGLETON, RALPH  
Address: 529 VERSAILLES DR SUITE 200  
City-St-Zip: MAITLAND, FL 32751

Title: VD  
Name: HARRELL, ROBERT  
Address: 529 VERSAILLES DR SUITE 200  
City-St-Zip: MAITLAND, FL 32751

Title: STD  
Name: DETWEILER, MAYLINDA  
Address: 529 VERSAILLES DR SUITE 200  
City-St-Zip: MAITLAND, FL 32751

I hereby 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 all other like empowered.

SIGNATURE: MAYLINDA DETWEILER

STD

07/18/2012

Electronic Signature of Signing Officer or Director

Date