

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90076 005 ****61.25

DOCUMENT # N13835

1. Corporation Name

KINGSMILL HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

P O BOX 361834
MELBOURNE FL 32936

Mailing Address

P O BOX 361834
MELBOURNE FL 32936



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

03/14/1986

4. FEI Number

59-2771857

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

HANES, ALBERT
3541 MONARCH STREET
MELBOURNE FL 32934

10. Name and Address of New Registered Agent

81 Name BARBARA CIVIL

82 Street Address (P.O. Box Number is Not Acceptable)

2414 EMPIRE AVENUE

83

84 City

MELBOURNE

FL

85 Zip Code

32934

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S
NAME BRENT D. BRAITHWAITE
STREET ADDRESS 3591 MONARCH ST.
CITY-ST-ZIP MELBOURNE FL

☒ DELETE

TITLE P
NAME HANES, ALBERT
STREET ADDRESS 3541 MONARCH ST
CITY-ST-ZIP MELBOURNE FL 32934

☒ DELETE

TITLE T
NAME BARBARA CIVIL
STREET ADDRESS 2414 EMPIRE AVE.
CITY-ST-ZIP MELBOURNE FL

☐ DELETE

TITLE D
NAME KRAH, ALAN
STREET ADDRESS 2469 NOBILITY AVE
CITY-ST-ZIP MELBOURNE FL 32934

☐ DELETE

TITLE D
NAME DESSERT, TRACY A
STREET ADDRESS 3501 MONARCH ST
CITY-ST-ZIP MELBOURNE FL 32934

☒ DELETE

TITLE D
NAME KUMAR, KRISHNA
STREET ADDRESS 2455 NOBILITY AVE
CITY-ST-ZIP MELBOURNE FL 32934

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME BLEVINS, BETTY
1.3 STREET ADDRESS 2413 NOBILITY AVE
1.4 CITY-ST-ZIP MELBOURNE FL 32934

☐ Change

☒ Addition

2.1 TITLE D
2.2 NAME PUGH, CHRISTY
2.3 STREET ADDRESS 2665 NOBILITY AVE
2.4 CITY-ST-ZIP MELBOURNE FL 32934

☐ Change

☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE D
5.2 NAME DRUMM, TIM
5.3 STREET ADDRESS 2430 NOBILITY AVE
5.4 CITY-ST-ZIP MELBOURNE FL 32934

☐ Change

☒ Addition

6.1 TITLE P
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☒ Change

☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Barbara Civil
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99 (407) 242-7410
Date Daytime Phone #

CR2E037 (11/98)