2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13835

FILED Feb 18, 2007 Secretary of State

Entity Name: KINGSMILL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
P O BOX 3 MELBOUF	361834 RNE, FL 3293	61834 US		2442 EMPIRE AVENUE MELBOURNE, FL 329347576 US New Mailing Address:		
Current N	lailing Addre	ss:	New Maili			
P O BOX 3 MELBOUF	361834 RNE, FL 3293	61834 US				
FEI Number: 59-2771857 FEI Number Applied For () FEI			FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and	l Address o	f New Registered Agent:	
TEELE, JAMES P PO BOX 361834 MELBOURNE, FL 329361834 US			2442 EMPI	TEELE, JAMES P 2442 EMPIRE AVENUE MELBOURNE, FL 329347576 US		
	e named entity e of Florida.	submits this statement for the	purpose of changing i	its registered	d office or registered agent, or both,	
SIGNATURE:					02/18/2007	
	Electro	nic Signature of Registered Ag	gent		Date	
OFFICER	S AND DIREC	CTORS:	ADDITION	IS/CHANGE	ES TO OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip:	FOSTER, NOF 2517 KINGDO		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	ASSANTE, GA 2616 KINGSM		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SLAUGHTER, 2542 NOBILIT		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SCOFIELD, W 2431 EMPIRE		Title: Name: Address: City-St-Zip:		(X) Change () Addition STINE M DOM AVENUE IE, FL 329347584	
Title: Name: Address: City-St-Zip:	RAY, CHRISTI 2472 KINGDO		Title: Name: Address: City-St-Zip:	T TEELE, JAW 2442 EMPIR MELBOURN		
Title: Name: Address: City-St-Zip:	TEELE, JAMÈ 2442 EMPIRE		Title: Name: Address: City-St-Zip:		() Change () Addition	

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: JAMES P TEELE T 02/18/2007