

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13835

FILED
Apr 04, 2011
Secretary of State

Entity Name: KINGSMILL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2529 MAJESTIC AVENUE
MELBOURNE, FL 32934 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 361834
MELBOURNE, FL 329361834 US

New Mailing Address:

FEI Number: 59-2771857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERS, ROBERT P
2529 MAJESTIC AVENUE
MELBOURNE, FL 32934 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
Name: PETERS, ROBERT
Address: 2529 MAJESTIC AVENUE
City-St-Zip: MELBOURNE, FL 32934 US

Title: VP
Name: SLAUGHTER, NELLY
Address: 2542 NOBILITY AVENUE
City-St-Zip: MELBOURNE, FL 32934 US

Title: T
Name: FOSTER, NORA
Address: 2517 KINGDOM AVENUE.
City-St-Zip: MELBOURNE, FL 32934

Title: D
Name: MILLER, NORMAN
Address: 2686 KINGSMILL AVENUE
City-St-Zip: MELBOURNE, FL 32934

Title: D
Name: MIRANDA, RANDALL
Address: 2500 KINGDOM AVENUE
City-St-Zip: MELBOURNE, FL 32934

Title: D
Name: KVASNOK, SUSANNE
Address: 2513 KINGMILL AVENUE
City-St-Zip: MELBOURNE, FL 32934

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: NORA FOSTER

T

04/04/2011

Electronic Signature of Signing Officer or Director

Date