

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13835

FILED
Mar 10, 2012
Secretary of State

Entity Name: KINGSMILL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2542 NOBILITY AVE
MELBOURNE, FL 32934 US

New Principal Place of Business:

2695 KINGSMILL AVE
MELBOURNE, FL 32934 US

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:

MILLER, NORMAN
2686 KINGSMILL AVE
MELBOURNE, FL 32934 US

Name and Address of New Registered Agent:

HOUSER, JUDY
2695 KINGSMILL AVE
MELBOURNE, FL 32934 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: JUDY HOUSER

03/10/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SLAUGHTER, STAFFORD
Address: 2542 NOBILITY AVE
City-St-Zip: MELBOURNE, FL 32934 US

Title: T
Name: HOUSER, JUDY
Address: 2695 KINGSMILL AVE
City-St-Zip: MELBOURNE, FL 32934 US

Title: D
Name: MYERS, TRISH
Address: 2681 KINGSMILL AVE.
City-St-Zip: MELBOURNE, FL 32934

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

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

Title: D
Name: TEELE, JAMES
Address: 2442 EMPIRE AVE
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: JUDY HOUSER

TREA

03/10/2012

Electronic Signature of Signing Officer or Director

Date