

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19542

FILED  
Jul 16, 2007  
Secretary of State

Entity Name: KIMI COURT HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

305 KIMI CT  
CASSELBERRY, FL 32707 US

**New Principal Place of Business:**

**Current Mailing Address:**

305 KIMI CT  
CASSELBERRY, FL 32707 US

**New Mailing Address:**

FEI Number: 59-2947068      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FORBES, IAN J JR  
305 KIMI CT  
CASSELBERRY, FL 32707 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: DP ( ) Delete  
Name: KALAMAN, MIKE  
Address: 333 KIMI CT  
City-St-Zip: CASSELBERRY, FL 32707

Title: DS ( ) Delete  
Name: BRAY, DONNA  
Address: 337 KIMI CT  
City-St-Zip: CASSELBERRY, FL 32707

Title: DT ( ) Delete  
Name: FORBES, IAN J  
Address: 305 KIMI CT  
City-St-Zip: CASSELBERRY, FL US

Title: DV ( ) Delete  
Name: SIMONELLI, MARTY  
Address: 345 KIMI CT  
City-St-Zip: CASSELBERRY, FL 32707

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: IAN J FORBES JR.

DT

07/16/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date