


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2008 08:00 A
Secretary of State

DOCUMENT # N28103	
1. Entity Name: KINGS LAKE HOMEOWNERS' ASSOCIATION OF ESCAMBA COUNTY, FLORIDA #2, INC.	

Principal Place of Business 1431 KINGSLAKE DR CANTONMENT, FL 32533 US	Mailing Address PO BOX 476 GONZALEZ, FL 32560 US
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DO NOT WRITE IN THIS SPACE



03172008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3042735	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SEVERSON, JACK 1420 KINGSLAKE DR CANTONMENT, FL 32533

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMITH, TERRY 1431 KINGSLAKE DR CANTONMENT, FL 32533
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARCILLIAT, CHERYL 401 LAKE CIR DR CANTONMENT, FL 32533
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SEVERSON, JACK 1420 KINGSLAKE DR CANTONMENT, FL 32533
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04/08/08-80028-022 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jack Severson* **JACK SEVERSON** 3-17-08 **(850) 452-4562**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #