2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30727

FILED Jan 15, 2009 Secretary of State

Entity Name: KILLIAN PLACE HOMEOWNERS ASSOCIATION, INC.

Current P 9716 SW				
9716 SW	Principal Place of Business:	New Principal Place	New Principal Place of Business:	
MIAMI, FL				
Current Mailing Address:		New Mailing Address	New Mailing Address:	
P O BOX MIAMI, FL	165823 . 331165823 US			
FEI Number	r: 65-0105374 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address o	f New Registered Agent:	
4TH FLOO 2525 PON MIAMI, FL	HAL, ALAN DR ICE DE LEON BOULEVARD . 33134 US e named entity submits this statement for the	purpose of changing its registered	d office or registered agent or both	
	e of Florida.	purpose of changing to registered	a omee of regionered agent, or both,	
SIGNATU			Data	
Electronic Signature of Registered Agent			Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	TD () Delete SHERIN, RICHARD 9764 S.W. 110 ST. MIAMI, FL 33176	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	PD () Delete	Title:	() Change () Addition	
Name: Address: City-St-Zip:	GARDNER, DAVID 9716 S.W. 110 ST. MIAMI, FL	Name: Address: City-St-Zip:		
Address:	9716 S.W. 110 ST.	Name: Address:	()Change ()Addition	
Address: City-St-Zip: Title: Name: Address:	9716 S.W. 110 ST. MIAMI, FL D () Delete MADRAZO, ANDRES 9866 SW 111 TERRACE	Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	9716 S.W. 110 ST. MIAMI, FL D () Delete MADRAZO, ANDRES 9866 SW 111 TERRACE MIAMI, FL 33176 SD () Delete GREEN, JANET 9816 SW 110 STREET	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	., .	

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: JANET GREEN DS 01/15/2009