2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# N46747

Entity Name: KINGS POINT VEHICLE STORAGE CLUB, INC.

Current Principal Place of Business:

1406 LELAND DR.
SUN CITY CENTER, FL 33573 US

New Principal Place of Business:

Current Mailing Address:

1406 LELAND DR.
SUN CITY CENTER, FL 33573 US

New Mailing Address:

FEI Number: 59-3101321 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURGESON, JACK W
1406 LELAND DR.
SUN CITY CENTER, FL 33573 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:	D	( ) Delete
Name:	GIENCKE, TED	
Address:	2311 MARKSMAN CT.	
City-St-Zip:	SUN CITY CENTER, FL 33573	
Title:	VPD	( ) Delete
Name:	MERSKIN, GUY	
Address:	2125 HAILSTONE CIRCLE	
City-St-Zip:	SUN CITY CENTER, FL	
Title:	D	( ) Delete
Name:	PETERSON, MARYLE	
Address:	2306 NEW ORCHARD CT	
City-St-Zip:	SUN CITY CENTER, FL 33573	
Title:	D	( ) Delete
Name:	DIETT, JOHN	
Address:	2495 KENSINGTON GRNS DR	
City-St-Zip:	SUN CITY CENTER, FL 33573	
Title:	PD	( ) Delete
Name:	CORTESE, JOHN	
Address:	1314 LELAND DR	
City-St-Zip:	SUN CITY CENTER, FL 33573	
Title:	STD	( ) Delete
Name:	BURGESON, JACK	
Address:	1406 LELAND DR.	
City-St-Zip:	SUN CITY CENTER, FL 33573	

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:	
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 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: JACK BURGESON STD 01/03/2007

Electronic Signature of Signing Officer or Director — Date