


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90219 049 ****61.25

DOCUMENT # N49563			
1. Entity Name KINGS PENINSULA HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business 201 DORT STREET SUITE A PLANT CITY, FL 33563 US		Mailing Address 201 DORT STREET SUITE A PLANT CITY, FL 33563 US	
2. Principal Place of Business 301 E. McDonald Rd.		3. Mailing Address 301 E. McDonald Rd	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Plant City, FL		City & State Plant City, FL	
4. FEI Number 59-3181171		Applied For <input type="checkbox"/> Not Applicable	
Zip 33567		Country US	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
GRANGER, DOUGLAS W 201 DORT STREET STE. A PLANT CITY, FL 33566		Name <u>Sandra J. Snapp</u> Street Address (P.O. Box Number is Not Acceptable) <u>301 E. McDonald Rd.</u> City <u>Plant City</u> <u>FL</u> Zip Code <u>33567</u>	
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: <u>Sandra J. Snapp</u>		SIGNATURE: <u>Sandra J. Snapp, Treasurer</u>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reappointing)	
DATE: <u>4/24/2006</u>		DATE	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANGER, DOUGLAS W. 201 DORT ST, STE. A PLANT CITY, FL 33563 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sandra J. Snapp 301 E. McDonald Road Plant City, FL 33567 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCALZO, ED 38545 LANGLOIS PLACE LEESBURG, FL 34788 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNAPP, HUBERT 301 E. MCDONALD ROAD PLANT CITY, FL 33567 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNAPP, SCOTT 403 E MCDONALD ROAD PLANT CITY, FL 33567 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u>Sandra J. Snapp</u>		SIGNATURE: <u>Sandra J. Snapp</u>	
Signature and typed or printed name of signing officer or director		Date	
		8-24-2006 813 737-2569	
		Daytime Phone #	