

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004991

FILED
Apr 14, 2011
Secretary of State

Entity Name: KELSTON LANE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4802 SW 85TH AVE
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 142124
GAINESVILLE, FL 32614 US

New Mailing Address:

FEI Number: 59-3315500

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REALTY SOLUTIONS OF NORTH FLORIDA, INC
4802 SW 85TH AVENUE
GAINESVILLE, FL 32608 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: T
Name: WHITE, NEIL
Address: 4329 NW 10 PL
City-St-Zip: GAINESVILLE, FL 32606

Title: VP
Name: BENNETT, CARROLL
Address: 4311 NW 10 PL
City-St-Zip: GAINESVILLE, FL 32605

Title: P
Name: BREWER, ERIN
Address: 4308 NW 10TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: D
Name: DOVER, JOANNE
Address: 4335 NW 10TH PL
City-St-Zip: GAINESVILLE, FL 32606

Title: MGR
Name: REALTY SOLUTIONS OF NORTH FLORIDA
Address: P.O. BOX 142124
City-St-Zip: GAINESVILLE, FL 32614

Title: D
Name: STUART, LINDA
Address: 4336 NW 10TH PLACE
City-St-Zip: GAINESVILLE, FL 32606

I hereby 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 all other like empowered.

SIGNATURE: KATHIE TROIANO

MGR

04/14/2011

Electronic Signature of Signing Officer or Director

Date