

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2004 8:00 am
Secretary of State

07-30-2004 90001 009 ****61.25

DOCUMENT # N94000005979

1. Entity Name
**THE WOODS AT KING'S CREST HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**12 E MONUMENT AVE
KISSIMMEE, FL 34741 US**

Mailing Address
**12 E MONUMENT AVE
KISSIMMEE, FL 34741 US**

44050592



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07192004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-3282861

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**D & F MANAGEMENT, LLC
12 E MONUMENT AVE
KISSIMMEE, FL 34741**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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	PD REINDL, MARK 2254 JESSICA LANE KISSIMMEE, FL 34744	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DEAN, BRENT 2278 JESSICA LANE KISSIMMEE, FL 34744	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LIZZO, SALVATORE 2270 JESSICA LANE KISSIMMEE, FL 34744	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LISAK, DAN 2269 JESSICA LANE KISSIMMEE, FL 34774	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD 	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD 	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Charles Linquanti 2303 Jessica Lane Kissimmee, FL 34774	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Krista Woodard 2267 Jessica Lane Kissimmee, FL 34774	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D William Edwards 1503 Jenni Lee Court Kissimmee, FL 34774	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Steve Theodoropoulos 2291 Jessica Lane Kissimmee, FL 34774	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Ann Cheney 2200 Lange Street Kissimmee, FL 34774	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Charles R. Linquanti*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/26/04 *407-847-0073*
Date Daytime Phone #