2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 28, 2005 8:00 am Secretary of State

DOCUMENT # N9400005979 1. Entity Name THE WOODS AT KING'S CREST HOMEOWNERS ASSOCIATION, INC.					О	1-28-2005	90018 (001 ****6	1.25
Principal Place 12 E MONUN KISSIMMEE, I	MENT AVE	Mailing Address 12 E MONUMENT AVE KISSIMMEE, FL 34741	us		40	00800)		
•		3. Mailing Address 101 Park Place Suite, Apt. #, etc. Suite 2	Blvd.		2440005	ng-NP		37 (10/03)	
City & State	e	City & State			4. FEI Number				plied For
Kissimme Zip	e, FL Country	Kissimmee, FL	Country		59-328286	01			t Applicable
34741	US	1	S Country		5. Certificate of St	atus Desired		\$8.75 Add Fee Required	
	6. Name and Address of Current F				7. Name and Add	ress of New R	egistered	Agent	
ASSOCIAT	TION MANAGEMENT GROUP	OF CENTRAL FL	Name	÷ :.	<u> </u>	· . · - ·	سي عد	- ~ ·	
101 PARK PLACE BLVD., SUITE 2 KISSIMMEE, FL 34741			Street A	Street Address (P.O. Box Number is Not Acceptable)					
KIOOIIVIKIL	L, / L 34/41								
			City	·			FL	Zip Code	
	named entity submits this statement for	gistered office o	r registere	d agent, or both, in	the State of Flo		familiar with,	and accept	
the obligat	ions of registered agent.	•					Ι,	1	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Pl	Registered Agent signal	ture required v	when reinstating)	1	124 DATE	105	
	Filing Fee Is \$61.25 Due by May 1, 2005	9. Election Camp Trust Fund Cor			\$5.00 May Be Added to Fees			k payable to tenent of Si	
10.	Due by May 1, 2005 OFFICERS AND DIR	Trust Fund Cor ECTORS	ntribution.	A	Added to Fees DDITIONS/CHANG	Flori	ida Depa	RECTORS IN	ale 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2005	Trust Fund Cor	ntribution.	Secr Jenn 2218	Added to Fées DDITIONS/CHANG etary ifer Cocke Lange St	Flori ESTO OFFICEI Croft	ida Depa	riment of Si	ate
TITLE NAME Street Address	Due by May 1, 2005 OFFICERS AND DIR TD LINGUANTI, CHARLES 2303 JESSICA LANE	Trust Fund Cor ECTORS	11. ITTLE NAME STREET ADDRESS	Secr Jenn 2218 Kiss	Added to Fees DDITIONS/CHANG etary ifer Cocke Lange St immee, FL	Flor ES TO OFFICE croft	ida Depa	RECTORS IN	ale 10
NAME STREET ADDRESS CITY-ST-ZIP YITLE NAME	Due by May 1, 2005 OFFICERS AND DIR TD LINQUANTI, CHARLES 2303 JESSICA LANE KISSIMMEE, FL 34774 SD WOODARD, KRISDTA	Trust Fund Cor	11. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME	Secr Jenn 2218 Kiss Pres	Added to Fees DDITIONS/CHANG etary ifer Cocke Lange St immee, FL ident	Flori ESTO OFFICEI Croft	ida Depa	RECTORS IN	10 X Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2005 OFFICERS AND DIR TD LINQUANTI, CHARLES 2303 JESSICA LANE KISSIMMEE, FL 34774 SD WOODARD, KRISDTA 2267 JESSICA LANE	Trust Fund Cor	11. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME STREET ADDRESS	Secr Jenn 2218 Kiss Pres Ann	Added to Fees DDITIONS/CHANG etary ifer Cocko Lange St immee, FL ident Cheney	ES TO OFFICE Croft 34744	ida Depa	RECTORS IN	10 X Addition
NAME STREET ADDRESS CITY-ST-ZIP YITLE NAME	Due by May 1, 2005 OFFICERS AND DIR TD LINQUANTI, CHARLES 2303 JESSICA LANE KISSIMMEE, FL 34774 SD WOODARD, KRISDTA	Trust Fund Cor	11. TITLE NAME STREET ADDRESS CITY-ST-ZEP TITLE NAME	Secr Jenn 2218 Kiss Pres Ann 2200 Kiss	Added to Fees DDITIONS/CHANG etary ifer Cocke Lange St immee, FL ident	ES TO OFFICE Croft 34744	ida Depa	RECTORS IN Change	10 S Addition Addition
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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 eath; 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.

Situation, or on an allaboration with an adolesse, with an other last empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Dayson Phone #