## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000000211

FILED Apr 10, 2007 Secretary of State

Entity Name: KINGSMILL AT EAST LAKE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 11902 RACE TRACK ROAD TAMPA, FL 33626 **Current Mailing Address: New Mailing Address:** 11902 RACE TRACK ROAD TAMPA, FL 33626 FEI Number: 59-3292522 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PROPERTY GROUP OF CENTRAL FLORIDA, INC 11902 RACE TRACK ROAD TAMPA, FL 33626 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DST () Delete () Change () Addition CLEMENTS, MIKE Name: Name: 633 KINGSMILL CT Address: Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: Title: () Delete Title: () Change () Addition WEISLOGEL, LOUIS Name: Name: Address: 615 KINGSMILL CT Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: Title: DVP () Delete Title: DVP (X) Change ( ) Addition CARRELLO, CARL MASSUA, GEORGE Name: Name: Address: 616KINGSMILL CT Address: 691 KINGSMILL CT City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: OLDSMAR, FL 34677 Title: ( ) Delete Title: () Change () Addition Name: TEIFER, STEVE Name: Address: 4880 WESTCHESTER CT Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MARTIN, VERA KORAN, DIANE Name: Name: 586 KINGSMILL CT 4874 WESTCHESTER CT Address: Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: OLDSMAR, FL 34677 Title: (X) Delete Title: () Change () Addition YANNOTTI, PAT Name: Name: Address: 4886 WESTCHESTER COURT Address: OLDSMAR, FL 346777 City-St-Zip: 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: LOUIS WEISLOGEL DP 04/10/2007