2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # N9600004153 1. Entity Name KEMET NEIGHBORHOOD ASSOCIATION, INC.				V.		ILED -7 PH 4:08	
•	e of Business	Mailing Address		100	CECDET	ADV BE STATE	
8440 LULA I		8440 LULA LANE			SEURE I	ARY OF STATE SSEE, FL ORIDA	
TALLANASSE	E, FL 32308	TALLAHASSEE, FL 32308			IALLANA	(22CC) LEGINDA	
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DO NOT WRITE IN THIS SPAC			CE	02072008	No Chg-NP	CR2E037 (4/06)	
			-	- remumber			For olicable
				· · · · · · · · · · · · · · · · · · ·	of Status Desired	\$8.75 Additions	
	8. Name and Address of Current Ro	cistored Ament		a. Octanoate c	or otalias ocalied	Fee Required	
	e. Haile die Address of Carrell No						
HILL. WILLIAM O				DO	NOT W	RITE	
	3440 LULA LANE FALLAHASSEE, FL 32308						
			IN THIS SPACE				
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 neme of registered agent and title if applicable. (NOTE: Registered Agent signature required whon rensisting) DATE							
	Filing Fee is \$61.25	Election Campaign Finar Trust Fund Contribution.		.00 May Be			
	Due by May 1, 2008			eu (0 rees			
TITLE	OFFICERS AND DI	RECTORS					
NAME	HILL, WILLIAM O						
STREET ADDRESS	8440 LULA LANE	500118356705 02/19/0801052018 **61.25					
CITY-ST-ZIP	TALLAHASSEE, FL 32309						
TITLE Name	VPD TAYLOR, AREATHA						
STREET ADDRESS	8424 LULA LANE						
CITY-ST-ZIP	TALLAHASSEE, FL 32309						
TITLE NAME	TD TAYLOR, JEROME D						
STREET ADDRESS	8424 LULA LANE		D O	NIOT 10	(D) TE		
CITY-ST-ZIP	TALLAHASSEE, FL 32309	DO NOT WRITE					
TITLE NAME				IN 7	THIS SI	PACE	
STREET ADDRESS			1				
CITY-ST-ZIP							
TITLE			1				
NAME Street address							
CITY-ST-ZIP							
TITLE			1				
NAME							
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STREET ADDRESS CITY-ST-ZIP							
STREET ADDRESS CITY-ST-ZIP 12. I hereby condicated of the cor	pertify that the information supplied with the on this report or supplemental report is treporation or the receiver or frustee empower or on an attachment with an address, with	ue and accurate and that my signal ered to execute this report as requi	ura chall hous tha i	rome least offect	ar if made under	anthu that I am an affinar as sis	
STREET ADDRESS CITY-ST-ZIP 12. I hereby condicated of the cor	on this report of supplemental report is treporation or the receiver or trustee empower or on an attachment with an address, with	ue and accurate and that my signal ered to execute this report as requi	ure shall have the s red by Chapter 617	rome least offect	ar if made under	oath; that I am an officer or dir e appears in Block 10 or Bloc	