

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006930

FILED
Apr 26, 2007
Secretary of State

Entity Name: KINGS GATE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8441 COOPER CREEK BLVD
UNIVERSITY PARK, FL 34201

New Principal Place of Business:

3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683

Current Mailing Address:

8441 COOPER CREEK BLVD
UNIVERSITY PARK, FL 34201

New Mailing Address:

P O BOX 1418
PALM HARBOR, FL 34682

FEI Number: 06-1508423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALDAUF, DAVID H
8441 COOPER CREEK BLVD
UNIVERSITY PARK, FL 34201 US

Name and Address of New Registered Agent:

HANSON, JACK B
MELROSE MANAGEMENT GROUP
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683 US

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: JACK B HANSON

04/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MURRAY, WILLIAM M
Address: 8441 COOPER CREEK BLVD
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: VPD () Delete
Name: FRANCO, RICHARD
Address: 8441 COOPER CREEK BLVD
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: TD () Delete
Name: SPANOS, ROBERT E
Address: 8441 COOPER CREEK BLVD
City-St-Zip: UNIVERSITY PARK, FL 34201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JACK B HANSON

RA

04/26/2007

Electronic Signature of Signing Officer or Director

Date