

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006294

FILED
Apr 27, 2009
Secretary of State

Entity Name: KANAPAH PINES UNIT III OWNERS' ASSOCIATION , INC.

Current Principal Place of Business:

5522 NW 43RD ST
SUITE B
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

5522 NW 43RD ST
SUITE B
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 59-3628153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORALES, CAROL A
C/O BOSSHARDT PROPERTY MGT., INC
5522-B NW 43RD STREET
GAINESVILLE, FL 32653 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: VAN CLEAVE, LARRY
Address: 10004 SW 87 TERRACE
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: KOWAL, BRAD
Address: 10008 SW 89 ST
City-St-Zip: GAINESVILLE, FL 32608

Title: DT () Delete
Name: GRISWOLD, TED
Address: 8724 SW 98 AVENUE
City-St-Zip: GAINESVILLE, FL 32608

Title: VPD () Delete
Name: MENEFRE, MIKE
Address: 10003 SW 90TH ST.
City-St-Zip: GAINESVILLE, FL 32608

Title: DS () Delete
Name: MCCAFFERTY, TOM
Address: 10007 SW 87 TERR
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: PUCKETT, DAN
Address: 8805 SW 98 AVENUE
City-St-Zip: GAINESVILLE, FL 32608

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

Title: VPD (X) Change () Addition
Name: WIRTH, JOSHUA
Address: 8912 SW 98TH AVENUE
City-St-Zip: GAINESVILLE, FL 32608

Title: DS (X) Change () Addition
Name: ORESKY, KERRY J
Address: 10018 SW 89TH STREET
City-St-Zip: GAINESVILLE, FL 32608

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: LARRY VAN CLEAVE

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date