

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001492

FILED
Apr 02, 2009
Secretary of State

Entity Name: ORIGINAL KENNEDY LAKES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5667 OLD BETHEL ROAD
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

5667 OLD BETHEL ROAD
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 59-3575144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, FRANCES O
5667 OLD BETHEL ROAD
CRESTVIEW, FL 32536 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: P () Delete
Name: FAIRCLOTH, DOUGLAS
Address: 5786 SEMINOLE DR
City-St-Zip: CRESTVIEW, FL 32536

Title: ST () Delete
Name: DAVIS, FRANCES O
Address: 5667 OLD BETHEL RD
City-St-Zip: CRESTVIEW, FL 32536

Title: D () Delete
Name: STEWART, BRUCE
Address: 104 OLD SOUTH DR
City-St-Zip: CRESTVIEW, FL 32536

Title: D () Delete
Name: OWENS, CARLA
Address: 1047 TALLOKAS RD
City-St-Zip: CRESTVIEW, FL 32536

Title: D () Delete
Name: SAPP, FRANK L
Address: 5667 OLD BETHEL RD.
City-St-Zip: CRESTVIEW, FL 32536

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:

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: FRANCES O. DAVIS

S/T

04/02/2009

Electronic Signature of Signing Officer or Director

Date