

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002569

FILED
Apr 09, 2009
Secretary of State

Entity Name: KINGSMILL VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O PHOENIX MANAGEMENT
3082 JOG RD
LAKE WORTH, FL 33467

New Principal Place of Business:

1500 GATEWAY BLVD
STE 220
BOYNTON BEACH, FL 33426

Current Mailing Address:

C/O PHOENIX MANAGEMENT
3082 JOG RD
LAKE WORTH, FL 33467

New Mailing Address:

1500 GATEWAY BLVD
STE 220
BOYNTON BEACH, FL 33426

FEI Number: 65-0977953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENTHAL, DAVID A
C/O PHOENIX MANAGEMENT
3082 JOG RD
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

VICTORY ACCOUNTING
1500 GATEWAY BLVD
STE 220
BOYNTON BEACH, FL 33426 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: VICKY FEICHT

04/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: KAPLAN, EUGENE
Address: 7053 COPPERFIELD CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: PD () Delete
Name: JAEGER, JOHN
Address: 6052 OAK BLUFF WAY
City-St-Zip: LAKE WORTH, FL 33467

Title: TD () Delete
Name: MAGLIARISI, SILKE
Address: 6244 OAK BLUFF WAY
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JAEGER, JOHN
Address: 6052 OAK BLUFF WAY
City-St-Zip: LAKE WORTH, FL 33467

Title: S (X) Change () Addition
Name: KAPLAN, EUGENE
Address: 7053 COPPERFIELD CIR
City-St-Zip: LAKE WORTH, FL 33467

Title: T (X) Change () Addition
Name: MAGLIARISI, SILKE
Address: 6244 OAK BLUFF WAY
City-St-Zip: LAKE WORTH, FL 33467

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: JOHN JAEGER

P

04/09/2009

Electronic Signature of Signing Officer or Director

Date