2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# 727242

Entity Name: KNOLLWOOD CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5865 BASIL DRIVE
WEST PALM BEACH, FL 33415

New Principal Place of Business:

4010 SOUTH 57TH AVE,
204
LAKE WORTH, FL 33463

Current Mailing Address:

4010 SOUTH 57TH AVE
204
GREENACRES, FL 33463

New Mailing Address:

FEI Number: 59-1493165 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ST. JOHN CORE & LEMME, P.A.A
CENTURION TOWER
STE. 01
WEST PALM BEACH, FL 33401 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: T ( ) Delete
Name: STEVENS, KAREN
Address: 5816 S BOND DR
City-St-Zip: WEST PALM BEACH, FL 33415

Title: S ( ) Delete
Name: PRETCHARD, JULIE
Address: 5827 ALBERT RD
City-St-Zip: WEST PALM BEACH, FL 33415

Title: P ( ) Delete
Name: HOLLAND, JAMES
Address: 2077 E BOND
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: STEVENS, KAREN
Address: 5816 S BOND DR
City-St-Zip: WEST PALM BEACH, FL 33415

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

Title: P (X) Change ( ) Addition
Name: PRETCHARD, DAVID
Address: 5827 ALBERT ROAD
City-St-Zip: WEST PALM BEACH, FL 33415

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: KAREN STEVENS P 04/29/2009

Electronic Signature of Signing Officer or Director — Date