

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jul 17, 2009  
Secretary of State**

DOCUMENT# N06000000696

Entity Name: KENTWOOD PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**2302 MAKI RD  
MAIN OFFICE  
PLANT CITY, FL 33566**New Principal Place of Business:****Current Mailing Address:**2302 MAKI RD  
MAIN OFFICE  
PLANT CITY, FL 33566**New Mailing Address:**3750 GUNN HIGHWAY  
SUITE 109  
TAMPA, FL 33618

FEI Number: 20-5086551

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**MEZERN, STEVEN A  
1801 HIGHLAND  
TAMPA, FL 33602 US**Name and Address of New Registered Agent:**VIDE, AVELINO  
3750 GUNN HIGHWAY  
SUITE 109  
TAMPA, FL 33618 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: AVELINO VIDE

07/17/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: P ( ) Delete  
Name: MURPHY, PETER  
Address: 2302 MAKI RD-MAIN OFFICE  
City-St-Zip: PLANT CITY, FL 33563Title: VP ( ) Delete  
Name: TONDRE, DANIEL  
Address: 2302 MAKI RD-MAIN OFFICE  
City-St-Zip: PLANT CITY, FL 33563Title: S ( ) Delete  
Name: DAVIS, NATHANIEL  
Address: 2302 MAKI RD-MAIN OFFICE  
City-St-Zip: PLANT CITY, FL 33563Title: T ( ) Delete  
Name: MCMURRAY, KIMBERLY  
Address: 2302 MAKI RD-MAIN OFFICE  
City-St-Zip: PLANT CITY, FL 33563Title: D ( ) Delete  
Name: INSUA, MICHAEL  
Address: 2302 MAKI RD-MAIN OFFICE  
City-St-Zip: PLANT CITY, FL 33563**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: PETE MURPHY

PRES

07/17/2009

Electronic Signature of Signing Officer or Director

Date