

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 18, 2011
Secretary of State

DOCUMENT# N10000009063

Entity Name: KENSINGTON ISLE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4343 ANCHOR PLAZA PKWY, SUITE 200
TAMPA, FL 33634**New Principal Place of Business:**18215 BRANCH RD
HUDSON, FL 34667**Current Mailing Address:**4343 ANCHOR PLAZA PKWY, SUITE 200
TAMPA, FL 33634**New Mailing Address:**18215 BRANCH RD
HUDSON, FL 34667**FEI Number:** 27-4111295**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**VALENTI, BETTY D
4343 ANCHOR PLAZA PKWY, SUITE 200
TAMPA, FL 33634 US**Name and Address of New Registered Agent:**WETHERINGTON, HAMILTON & HARRISON, P.A.
1010 NO FLORIDA AVE
TAMPA, FL 33603 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: DOUGLAS CHRISTY

11/18/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MCKAY, ADAM J
Address: 18215 BRANCH RD
City-St-Zip: HUDSON, FL 34667

Title: VD
Name: HOLLYFIELD, CLAUDE A
Address: 18215 BRANCH RD
City-St-Zip: HUDSON, FL 34667

Title: STD
Name: CORAGGIO, JAMES T
Address: 18215 BRANCH RD
City-St-Zip: HUDSON, FL 34667

I hereby 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 all other like empowered.

SIGNATURE: PAMELA S. WASHBURN

AGT

11/18/2011

Electronic Signature of Signing Officer or Director

Date