

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 01, 2005 8:00 am
Secretary of State

04-01-2005 90007 030 ****61.25

DOCUMENT # N37365

1. Entity Name

KINGSWOOD A CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

EDWARD UGARTE
20 KINGSWOOD A
WEST PALM BEACH FL 33417
US

Mailing Address

2400 CENTRE PARK W DRIVE
SUITE 175
W PALM BEACH FL 33409



2. Principal Place of Business

Suite, Apt. #, etc.

5 Kingswood A
West Palm Beach

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/04)

4. FEI Number

65-0191925

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FIELDS, ROSELYN
1 KINGSWOOD AVE
WEST PALM BEACH FL 33417

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	UGARTE, EDWARD	
STREET ADDRESS	20 KINGSWOOD A	
CITY-ST-ZIP	W PALM BEACH FL 33417	
TITLE	ST	☐ Delete
NAME	FIELDS, ROSELYN	
STREET ADDRESS	1 KINGSWOOD A	
CITY-ST-ZIP	W. PALM BEACH FL 33417	
TITLE	D	☒ Delete
NAME	FIELDS, ROBERT	
STREET ADDRESS	1 KINGSWOOD A	
CITY-ST-ZIP	WEST PALM BEACH FL 33417	
TITLE	V	☒ Delete
NAME	CARNEY, JOAN	
STREET ADDRESS	12 KINGSWOOD A	
CITY-ST-ZIP	WEST PALM BEACH FL 33417	
TITLE	P	☐ Delete
NAME	MONGIELLO, FRANK	
STREET ADDRESS	10 KINGS WOOD A	
CITY-ST-ZIP	WEST PALM BEACH FL 33417	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	V P D	☐ Change ☒ Addition
NAME	Aveyard, Bob	
STREET ADDRESS	5 Kingswood A	
CITY-ST-ZIP	West Palm Beach FL 33409	
TITLE	S D	☐ Change ☒ Addition
NAME	Mongiello, Patricia	
STREET ADDRESS	10 Kingswood A	
CITY-ST-ZIP	West Palm Beach FL 33417	
TITLE	T D	☐ Change ☒ Addition
NAME	Fields, Roselyn	
STREET ADDRESS	1 Kingswood A	
CITY-ST-ZIP	West Palm Beach FL 33417	
TITLE	D	☐ Change ☒ Addition
NAME	Maldonado, Luis	
STREET ADDRESS	15 Kingswood A	
CITY-ST-ZIP	West Palm Beach FL 33417	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Roselyn Fields Roselyn Fields 3/8/05 616-9286

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #