

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # N51102 (4)  
1. Corporation Name  
THE KENSINGTON COMMONS ASSOCIATION, INC.

95 JAN 30 AM 9:11

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
3300 UNIVERSITY DR. 3300 UNIVERSITY DR.  
CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified 10/01/1992 3a. Date of Last Report 02/28/1994  
4. FEI Number 65-0408954 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 Zip Country 29 Zip Country

5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
FLORIDA NATIONAL PROPERTIES, INC.  
3300 UNIVERSITY DR.  
10TH FLOOR  
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE PD  
NAME MCGOWAN, JAMES P.  
STREET ADDRESS 3300 UNIVERSITY DR.  
CITY-ST-ZIP CORAL SPRINGS FL  
TITLE SD  
NAME TARAVELLA, J.P. JR.  
STREET ADDRESS 3300 UNIVERSITY DR.  
CITY-ST-ZIP CORAL SPRINGS FL  
TITLE TD  
NAME LEONHARDT, STEVEN A.  
STREET ADDRESS 3300 UNIVERSITY DR.  
CITY-ST-ZIP CORAL SPRINGS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065  
2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065  
3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP CORAL SPRINGS, FL 33065  
4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J.P. Taravella, Jr. J.P. TARAVELLA, JR. 1-12-95 305-752-1100  
Date Daytime Phone #