2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# N98000001240

Entity Name: PARKWOOD AT KENSINGTON HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

175 W CAMINO REAL
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

175 W CAMINO REAL
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-0859375 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HIRSCH AND COMPANY CPAS, INC.
175 W CAMINO REAL
BOCA RATON, FL 33432 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: P ( ) Delete
Name: DIXON, MANDY
Address: 10932 N.W. 56TH COURT
City-St-Zip: CORAL SPRINGS, FL 33076

Title: T ( ) Delete
Name: HASHAM, MURTAZA
Address: 10988 N.W. 56TH COURT
City-St-Zip: CORAL SPRINGS, FL 33076

Title: S ( ) Delete
Name: SCAPERROTTA, DIANE
Address: 5750 N.W. 109TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D ( ) Delete
Name: CONTRERAS, MAURICE
Address: 10918 N.W. 56 COURT
City-St-Zip: CORAL SPRINGS, FL 33076

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:

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: MANDY DIXON P 04/22/2009

Electronic Signature of Signing Officer or Director — Date