

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 05, 2009
Secretary of State

DOCUMENT# 704835

Entity Name: KINGSWOOD MANOR ASSOCIATION INC**Current Principal Place of Business:**1737 BALTIMORE DRIVE
ORLANDO, FL 328104975**New Principal Place of Business:****Current Mailing Address:**PO BOX 607383
ORLANDO, FL 32860**New Mailing Address:****FEI Number:** 59-3189102**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DIXON, STERLING W
5501 EGGLESTON AVENUE
ORLANDO, FL 328104929 US**Name and Address of New Registered Agent:**PORTER, PATRICIA A
1089 PRINCEWOOD DR
ORLANDO, FL 328104541 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: PATRICIA A PORTER

10/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMEDLEY, RUSSEL
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32810 US

Title: VP () Delete
Name: TUZZEO, MARIA
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32810

Title: S () Delete
Name: ZIMMERMAN, MARCIA
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32810

Title: T () Delete
Name: DIXON, STERLING
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: KALLAS, JERRY
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: FULTON, NORMAN
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PORTER, PATRICIA A
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860 US

Title: VP (X) Change () Addition
Name: DOTSON, LOIS
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860

Title: S (X) Change () Addition
Name: ZIMMERMAN, MARCIA
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860

Title: T (X) Change () Addition
Name: IRONS, CINDY
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860

Title: D (X) Change () Addition
Name: SMITH, TOM
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860

Title: D (X) Change () Addition
Name: FULTON, NORMAN
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860

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: PATRICIA A PORTER

P

10/05/2009

Electronic Signature of Signing Officer or Director

Date