

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720377

Entity Name: KENILWOOD TOWNHOUSE ASSOCIATION, INC.**Current Principal Place of Business:**2121 KILLARNEY WAY
TALLAHASSEE, FL 32309**Current Mailing Address:**POST OFFICE BOX 11143
TALLAHASSEE, FL 32302**FEI Number:** 59-1374911**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLORIDA ASSOCIATION & PROPERTY MANAGEMENT
INC.
2121 KILLARNEY WAY
TALLAHASSEE, FL 32309 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DP
Name	IORE, DANO
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	DVP
Name	BOYLE, CHARLES
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	DST
Name	MCCORMICK, MARY
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	D
Name	COLE, DAVID
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	D
Name	CADWALLADER, JAMES
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

Title	D
Name	BRISTOW, KAREN
Address	POST OFFICE BOX 11143
City-State-Zip:	TALLAHASSEE FL 32302

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: DANO IORE

PD

04/15/2013

Electronic Signature of Signing Officer/Director Detail

Date