

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769475

Entity Name: KENSINGTON WALK MASTER ASSOCIATION, INC.**Current Principal Place of Business:**6600 SOMERSET DR
BOCA RATON, FL 33433**Current Mailing Address:**C/O CMC MANAGEMENT, INC.
2950 JOG ROAD
GREENACRES, FL 33467 US**FEI Number:** 59-2371470**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CENTURY MANAGEMENT CONSULTANTS
2950 JOG ROAD
GREENACRES, FL 33467 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	SECRETARY, DIRECTOR
Name	RODRIGUEZ, FRANCES
Address	6552 ARLEIGH COURT, M201
City-State-Zip:	BOCA RATON FL 33433

Title	PRESIDENT, DIRECTOR
Name	FERGUSON, CHRISTINE
Address	21790 LINWOOD WAY
City-State-Zip:	BOCA RATON FL 33433

Title	TREASURER, DIRECTOR
Name	ARGENTINI, AMOS
Address	10986 BAL HARBOR DRIVE
City-State-Zip:	BOCA RATON FL 33498

Title	VP, DIRECTOR
Name	HERMON, DANIEL
Address	7120 VIA MARBELLA
City-State-Zip:	BOCA RATON FL 33433
Title	D
Name	MARANO, PATRICIA
Address	21938 REMSEN TERRACE, D202
City-State-Zip:	BOCA RATON FL 33433
Title	D
Name	NAJAK, CHRISTINE
Address	6551 ARLEIGH COURT, L205
City-State-Zip:	BOCA RATON FL 33433

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: CHRISTINE FERGUSON**PRESIDENT****04/24/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date