

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003284

Entity Name: TOWNHOMES OF KENDALL POINTE HOMEOWNERS ASSOCIATION, INC.**FILED**
Jan 07, 2013
Secretary of State
CC3230922959**Current Principal Place of Business:**6620 SOUTHPOINT DRIVE SOUTH
SUITE 610
JACKSONVILLE, FL 32224**Current Mailing Address:**6620 SOUTHPOINT DRIVE SOUTH
SUITE 610
JACKSONVILLE, FL 32224 US**FEI Number: 20-2653844****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PEPER, RICHARD
8833 PERIMETER PARK BLVD.
SUITE 602
JACKSONVILLE, FL 32216 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: RICHARD PEPER, ESQ****01/07/2013**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	QUITTER, MATT
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32224

Title	DIRECTOR
Name	GRIMES, RUSSELL
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32224

Title	TREASURER
Name	KUWANANH, PAYNE
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32224

Title	TRUSTEE
Name	MOORE, DOMINICA
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32224

Title	TRUSTEE
Name	DANTZLER, MARYANNE
Address	6620 SOUTHPOINT DRIVE SOUTH SUITE 610
City-State-Zip:	JACKSONVILLE FL 32224

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: MATT QUITTER**PRESIDENT****01/07/2013**

Electronic Signature of Signing Officer/Director Detail

Date