

**2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N06000000501

**Entity Name:** KINGSWAY ESTATES HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Oct 21, 2014**  
**Secretary of State**  
**CC9581627450**

**Current Principal Place of Business:**

18302 HIGHWOODS PRESERVE PKWY  
SUITE 110  
TAMPA, FL 33647

**Current Mailing Address:**

5450 BRUCE B. DOWN BLVD.  
SUITE 309  
WESLEY CHAPEL, FL 33544 US

**FEI Number: 20-5101566**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PREMIUM SOLUTIONS GROUP  
18302 HIGHWOODS PRESERVE PKWY  
SUITE 110  
TAMPA, FL 33647 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: CHERLENE ADEWUNMI**

**10/21/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            RICHARDS, DAVID  
Address        5450 BRUCE B. DOWN BLVD.  
                  SUITE 309  
City-State-Zip: WESLEY CHAPEL FL 33544

Title            SECRETARY  
Name            BHOLA, ANIRBAN  
Address        5450 BRUCE B. DOWN BLVD.  
                  SUITE 309  
City-State-Zip: WESLEY CHAPEL FL 33544

Title            DIRECTOR  
Name            GUITERREZ, KENNY  
Address        5450 BRUCE B. DOWN BLVD.  
                  SUITE 309  
City-State-Zip: WESLEY CHAPEL FL 33544

Title            VP  
Name            BAUCOM, WALTER  
Address        5450 BRUCE B. DOWN BLVD.  
                  SUITE 309  
City-State-Zip: WESLEY CHAPEL FL 33544

*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: DAVID RICHARDS**

**PRESIDENT**

**10/21/2014**

Electronic Signature of Signing Officer/Director Detail

Date