

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000000501

**FILED**  
**Mar 29, 2013**  
**Secretary of State**  
**CC7219972264**

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

**Current Principal Place of Business:**

2649 WINGUARD CIRCLE  
SUITE 101  
WESLEY CHAPEL, FL 33544

**Current Mailing Address:**

2649 WINGUARD CIRCLE  
SUITE 101  
WESLEY CHAPEL, FL 33544 US

**FEI Number:** 20-5101566

**Certificate of Status Desired:** No

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

PREMIUM SOLUTIONS GROUP  
5680 W. CYPRESS ST.  
SUITE A  
TAMPA, FL 33607 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

03/29/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name OPELA, JERRY  
Address 2649 WINGUARD CIRCLE  
SUITE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title VP  
Name RICHARDS, DAVID  
Address 2649 WINGUARD CIRCLE  
SUITE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title S  
Name BHOLA, ANIRBAN  
Address 2649 WINGUARD CIRCLE  
SUITE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title T  
Name GRIFONI, PAUL  
Address 2649 WINGUARD CIRCLE  
SUITE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title D  
Name BAUCOM, WALTER  
Address 2649 WINGUARD CIRCLE  
SUITE 101  
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:** JERRY OPELA

**PRESIDENT**

03/29/2013

Electronic Signature of Signing Officer/Director Detail

Date