

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25869

FILED
Feb 25, 2015
Secretary of State
CC9248760626

Entity Name: KINGWOOD GARDEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALLIANCE MANAGEMENT, LLC
3806 EXCHANGE AVENUE
NAPLES, FL 34104

Current Mailing Address:

C/O ALLIANCE MANAGEMENT, LLC
3806 EXCHANGE AVENUE
NAPLES, FL 34104 US

FEI Number: 65-0059013

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KNOLL, RICHARD H
ALLIANCE MANAGEMENT, LLC
3806 EXCHANGE AVENUE
NAPLES, FL 34104 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 P, DIRECTOR
Name CINQUEGRANA, DEBRA
Address 1850 WEST CROWN POINTE BLVD.
A102
City-State-Zip: NAPLES FL 34112

Title SECRETARY, DIRECTOR
Name MEDIATE, MARIE
Address 1950 WEST CROWN POINTE BLVD.
B205
City-State-Zip: NAPLES FL 34112

Title VP, DIRECTOR
Name LAURITE, EDWARD
Address 1850 W. CROWN POINTE BLVD
A204
City-State-Zip: NAPLES FL 34112

Title TREASURER, DIRECTOR
Name JEROLIMO, TONI
Address 45 SPICE BUSH LANE
City-State-Zip: MILFORD CT 06461

Title DIRECTOR
Name SCOFIELD, LUCY
Address 127 RIDGE PARK AVENUE
City-State-Zip: STAMFORD CT 06905

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: DEBRA CINQUEGRANA

PRESIDENT

02/25/2015

Electronic Signature of Signing Officer/Director Detail

Date