2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25869

Entity Name: KINGWOOD GARDEN CONDOMINIUM ASSOCIATION, INC.

FILED Feb 25, 2016 **Secretary of State** CC7903926670

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:

City-State-Zip:

Electronic Signature of Registered Agent

City-State-Zip:

Name

NAPLES FL 34112

Officer/Director Detail:

Title P. DIRECTOR Title SECRETARY, DIRECTOR

Name CINQUEGRANA, DEBRA Name MEDIATE, MARIE

1850 WEST CROWN POINTE BLVD. 1950 WEST CROWN POINTE BLVD. Address Address B205 A102

Title VP, DIRECTOR Title TREASURER, DIRECTOR

Name LAURITE, EDWARD JEROLIMO, TONI

Address 1850 W. CROWN POINTE BLVD Address 45 SPICE BUSH LANE

A204 City-State-Zip: MILFORD CT 06461

City-State-Zip: NAPLES FL 34112

Title DIRECTOR BONDRA, MARY Name

2250 W. CROWN POINTE BLVD Address

NAPLES FL 34112

E124

City-State-Zip: NAPLES FL 34112

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** Electronic Signature of Signing Officer/Director Detail

02/25/2016

Date