2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25869

Entity Name: KINGWOOD GARDEN CONDOMINIUM ASSOCIATION, INC.

FILED Feb 27, 2018 Secretary of State CC0082642317

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:

ALLIANCE MANAGEMENT, LLC 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: RICHARD KNOLL 02/27/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title P, DIRECTOR Title DIRECTOR

Name CINQUEGRANA, DEBRA Name FERGUSON, KEVIN

Address 1850 WEST CROWN POINTE BLVD. Address 2150 WEST CROWN POINTE BLVD.

A102 D218

City-State-Zip: NAPLES FL 34112 City-State-Zip: NAPLES FL 34112

Title VP, DIRECTOR Title TREASURER, DIRECTOR

Name LAURITE, EDWARD Name 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 SECRETARY

Name HARRIS, YVONNE

Address 8686 S. PALMER ROAD

City-State-Zip: NEW CARLISLE OH 45344

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 02/27/2018