Entity Name: CLASSICS AT KENSINGTON I HOMEOWNERS ASSOCIATION, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

DOCUMENT# N93000005184

C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103 CORAL SPRINGS, FL 33065

Current Mailing Address:

C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103 CORAL SPRINGS, FL 33065 US

FEI Number: 65-0441077

Name and Address of Current Registered Agent:

BAKALAR AND ASSOCIATES, P.A. 12472 WEST ATLANTIC BLVD. CORAL SPRINGS, FL 33071 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.

Electronic Signature of Registered Agent

Officer/Director Detail :

Officer/Director Detail :			
Title	PRESIDENT	Title	DIRECTOR
Name	RANDLEY, LOIS	Name	ALLEN, ANTHONY
Address	C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103	Address	C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065
Title	D	Title	TREASURER
Name	CRUZ, JESUS	Name	ENGLISH, BRYAN
Address	C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103	Address	C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065
Title	VP	Title	DIRECTOR
Name	BRUNO, JOHN	Name	HAROON, SUMAIR
Address	C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103	Address	C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065
Title	SECRETARY		
Name	ARCHILLA, DAVID		
Address	C/O UNITED COMMUNITY MANAGEMENT CORP. 11784 WEST SAMPLE RD. SUITE 103		
City-State-Zip:	CORAL SPRINGS FL 33065		

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: ENGLISH, BRYAN

TREASURER

03/09/2021

FILED Mar 09, 2021 Secretary of State 4969068628CC

03/09/2021

Certificate of Status Desired: No

Date