

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 654260

**FILED**  
**Feb 08, 2010**  
**Secretary of State**

**Entity Name:** KENSINGTON ASSET MANAGEMENT, INC.

**Current Principal Place of Business:**

4611 RUE BORDEAUX  
LUTZ, FL 33558 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 270877  
TAMPA, FL 33688

**New Mailing Address:**

**FEI Number:** 59-1970792

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ARCHIBALD, GERALD K.  
4611 RUE BORDEAUX  
LUTZ, FL 33558 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ARCHIBALD, GERALD K  
Address: 4611 RUE BORDEAUX  
City-St-Zip: LUTZ, FL 33558

Title: S  
Name: ARCHIBALD, SUZAN E  
Address: 4611 RUE BORDEAUX  
City-St-Zip: LUTZ, FL 33558

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** GERALD K. ARCHIBALD

PRES

02/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date