

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 25, 2010
Secretary of State

DOCUMENT# 704835

Entity Name: KINGSWOOD MANOR ASSOCIATION INC**Current Principal Place of Business:**1737 BALTIMORE DRIVE
ORLANDO, FL 328104975**New Principal Place of Business:****Current Mailing Address:**PO BOX 607383
ORLANDO, FL 32860**New Mailing Address:****FEI Number:** 59-3189102**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PORTER, PATRICIA A
1089 PRINCEWOOD DR
ORLANDO, FL 328104541 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

OFFICERS AND DIRECTORS:

Title: P
Name: PORTER, PATRICIA A
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860 US

Title: VP
Name: IRONS, CINDY
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860

Title: S
Name: ELLER, SYLVIA
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860

Title: D
Name: FULTON, NORMAN
Address: PO BOX 607383
City-St-Zip: ORLANDO, FL 32860

Title: T
Name: SMITH, SUSAN
Address: P O BOX 607383
City-St-Zip: ORLANDO, FL 32860 US

Title: A T
Name: RONNIE, PORTER
Address: P O BOX 607383
City-St-Zip: ORLANDO, FL 32860

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: PATRICIA A PORTER

P

10/25/2010

Electronic Signature of Signing Officer or Director

Date