

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 13, 2003 8:00 am
Secretary of State

03-13-2003 90083 050 ****61.25

DOCUMENT # 704835

1. Entity Name
KINGSWOOD MANOR ASSOCIATION INC



Principal Place of Business
**1737 BALTIMORE DRIVE
ORLANDO FL 32810-4975**

Mailing Address
**1737 BALTIMORE DRIVE
ORLANDO FL 32810-4975**

2. Principal Place of Business
Suite, Apt. #, etc.


3. Mailing Address
P.O. Box 607383
Suite, Apt. #, etc.

City & State
ORLANDO FL

City & State
ORLANDO FL

Zip
32860

Country
U.S.A.



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3189102**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**LINDGREN, SHARON
5516 IMPERIAL AVENUE
ORLANDO FL 32810**

7. Name and Address of New Registered Agent

Name **PENNISY RICHARDSON**

Street Address (P.O. Box Number is Not Acceptable)
1228 BEATRICE DR

City **ORLANDO FL 32810 FL** Zip Code **32810**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **PENNISY RICHARDSON** *Pennisy Richardson* **3/11/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	LINDGREN, LENNY	
STREET ADDRESS	5516 IMPERIAL DR	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	HINMAN, PAT	
STREET ADDRESS	1627 LEEWAY DR	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WILKINSON, BERTHA	
STREET ADDRESS	5515 IMPERIAL DR.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WILKERSON, LOIS	
STREET ADDRESS	1609 BEATRICE DR	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	LINDGREN, SHARON	
STREET ADDRESS	5516 IMPERIAL DRIVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	FULTON, NORMAN	
STREET ADDRESS	1301 LEEWAY AVENUE	
CITY-ST-ZIP	ORLANDO FL 32810	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LOIS WILKERSON	
STREET ADDRESS	1609 BEATRICE DR	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LISA LOVELL	
STREET ADDRESS	5304 NEWHALL AVE	
CITY-ST-ZIP	ORLANDO, FL 32810	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DARYL NELSON	
STREET ADDRESS	1005 ALFRED DR	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT SMOOTS	
STREET ADDRESS	5329 KINGSWOOD DR	
CITY-ST-ZIP	ORLANDO, FL 32810	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PENNISY RICHARDSON	
STREET ADDRESS	1228 BEATRICE DR	
CITY-ST-ZIP	ORLANDO FL 32810	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PHYLLIS J ANGELO	
STREET ADDRESS	1623 BALTIMORE DR, P.O. BOX 607825	
CITY-ST-ZIP	ORLANDO FL 32860-7825	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *PHYLLIS J ANGELO* **PHYLLIS J ANGELO** **3-10-2003**

CR2E037 (10/02)