2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT.

DO NOT WRITE IN THIS SPACE

DOCUMENT #725249

1. Entity Name

KIRKLAND HOUSE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

101 WORTH AVE

PALM BEACH, FL 33480-4422

101 WORTH AVE

PALM BEACH, FL 33480-4422

FILED Mar 21, 2006 8:00 am Secretary of State

03-21-2006 90019 026 ****61.25



01062006 No Chg-NP

CR2E037 (11/05)

4.	FEI Number						
	59-1517738						

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

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6	Name and A	Address of	Current Re	nistered Agent	ĺ

ASHTON, HARRIS'J 101 WORTH AVE #3B PALM BEACH, FL 33480

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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.	Signature, typed or printed name of registered agent and title i	applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE			
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Financ Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS		<u></u>	<u> </u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MORRISSEY, KAY 101 WORTH AVE., #2D PALM BEACH, FL 33480							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BUCKLEY, CAROLYN C 101 WORTH AVE., APT 5D PALM BEACH, FL 33480							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PALM BEACH, FL 33480 PT James P. Manning STRAUSS, MARLENE-B			DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASTHON, HARRIS J 101 WORTH AVE., APT 3B PALM BEACH, FL 33480							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BROWN, MARCELLA 281 SUNSET CIR JUPITER, FL 33458 GEN	be, Joanne nta ave ear 4B Beach, Pl 33480						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.								