

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735814

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** KINGSWOOD, PHASE I, INC.

**Current Principal Place of Business:**

2950 SE OCEAN BLVD.  
CLUBHOUSE PHASE 1  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

2950 SE OCEAN BLVD.  
CLUBHOUSE PHASE 1  
STUART, FL 34996

**New Mailing Address:**

**FEI Number:** 59-1695575

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARD, MARK A  
2950 SE OCEAN BLVD.  
BUILDING 1, APT. 5  
STUART, FL 34996 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:** PD  
**Name:** SOBOLESKI, EUGENE  
**Address:** 2950 SE OCEAN BLVD. UNIT 9-6  
**City-St-Zip:** STUART, FL 34996

**Title:** SD  
**Name:** FORTUNE, ALBERT  
**Address:** 2950 SE OCEAN BLVD. UNIT 59-1  
**City-St-Zip:** STUART, FL 34996

**Title:** D  
**Name:** FELBOTTE, CHARLES D  
**Address:** 2950 SE OCEAN BLVD. UNIT 12-3  
**City-St-Zip:** STUART, FL 34996

**Title:** D  
**Name:** MANSFIELD, MICHAEL  
**Address:** 2950 SE OCEAN BLVD. UNIT 13-5  
**City-St-Zip:** STUART, FL 34996

**Title:** D  
**Name:** SCHOO, RUTH  
**Address:** 2950 SE OCEAN BLVD. UNIT 9-2  
**City-St-Zip:** STUART, FL 34996

**Title:** D  
**Name:** WARD, MARK A  
**Address:** 2950 SE OCEAN BLVD. UNIT 1-5  
**City-St-Zip:** STUART, FL 34996

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:** LIZ DIAZ, AS AGENT

LCAM

03/30/2010

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

\_\_\_\_\_  
Date