2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #742646



Jan 31, 2005 8:00 am Secretary of State 01-31-2005 90069 045 ****61.25 KINGSWOOD ASSOCIATION NO. 3, INC. Mailing Address Principal Place of Business **4**0003556 2950 S.E. OCEAN BLVD. CLUBHOUSE #4 2950 S.E. OCEAN BLVD. CLUBHOUSE #4 STUART, FL 34996 STUART, FL 34996 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01052005 Chg-NP CR2E037 (10/03) Applied For FEI Number 59-1999245 City & State City & State Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JANE L. CORNETT ESQ. Street Address (P.O. Box Number is Not Acceptable) 401 EAST OSCEOLA ST. STUART, FL 34994 Zip Code City 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 , ... (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. 54 Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Vice President + D. . . Jack Clampitt 2950 SE Ocean Blut. 115-4 ☐ Defete TITLE TITLE BERGER, DONNA J NAME STREET ADDRESS 2950 S.E. OCEAN 122-4 STREET ADDRESS STuart FL 34 996 CITY-ST-ZIP STUART, FL 34996 CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME REYHAUD, NAN NAME STREET ADDRESS 2950 SE OCEAN BLVD., 115-1 STREET ADDRESS CITY-ST-ZIP STUART, FL 34996 CITY-ST-7IP Change Addition TIT! F TITLE ☐ Delete WOODBURY, ELLEN NAME NAME 2950 SE OCEAN BLVD., 110-402 STREET ADDRESS STREET ADDRESS STUART, FL 34996 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME DRICSCOLL, JAY NAME STREET ADDRESS STREET ADDRESS 2950 SE OCEAN BLVD., 124-3 STUART, FL 34996 CITY-ST-ZIP CITY-ST-ZIP ☐ Change noitibbA 🔲 ☐ Delete TITLE NAME WHALE, MARGARET NAME STREET ADDRESS 2950 SE OCEAN BLVD., 109-201 STREET ADDRESS CITY-ST-ZIP STUART, FL 34996 CITY-ST-7P ☐ Change ☐ Addition TITLE TITLE . ☐ Delete HAYMAN, ROBERT NAME NAME 2950 SE OCEAN BLVD. 478-204- 11 0- 2 04 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STUART, FL, 34996 1 CITY-ST-ZIP

12... I hereby certify that the information supplied with this filling 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.

MMU

Donna J. Berger

FILED