


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # 742764 1. Entity Name KENT C CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 48 KENT C WEST PALM BEACH FL 33417 US	Mailing Address 48 KENT C WEST PALM BEACH FL 33417 US
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/06)

City & State Zip Country	City & State Zip Country
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4. FEI Number 59-1651339	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SMALL, IRVING 48 KENT CT W PALM BCH FL 33417-1706	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

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		<input type="checkbox"/> Delete
TITLE	PD SMALL, IRVING	
NAM	48 KENT C	
STREET ADDRESS	W. PALM BEACH FL 33417	
CITY-ST-ZIP		
TITLE	1VP	<input type="checkbox"/> Delete
NAM	WEAVER, STEVE	
STREET ADDRESS	43 KENT C	
CITY-ST-ZIP	WEST PALM BEACH FL 33417	
TITLE	ST	<input type="checkbox"/> Delete
NAM	WEAVER, CHERYL	
STREET ADDRESS	43 KENT C	
CITY-ST-ZIP	WEST PALM BEACH FL 33417	
TITLE	T	<input type="checkbox"/> Delete
NAM	LEIBOWITZ, EVELYN	
STREET ADDRESS	33 KENT C	
CITY-ST-ZIP	W PALM BCH FL 33417	
TITLE	2VP	<input type="checkbox"/> Delete
NAM	RICH, SHIRLEY	
STREET ADDRESS	40 KENT C	
CITY-ST-ZIP	WEST PALM BEACH FL 33417	
TITLE		<input type="checkbox"/> Delete
NAM		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		
NAM		
STREET ADDRESS	000000680031	
CITY-ST-ZIP	04/03/07-80062-001 61.25	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAM		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAM		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAM		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: *Irving Small* *Irving Small Pres. 1/19/07 561615-5236*