FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996 2-14-96 B. 61.25 C.

DOCUMENT # 742866 (7)

1. Corporation Name

KIRKWOOD TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O TOUCHSTONE WEBB MANAGEMENT 5710 S. DIXIE HIGHWAY. SUITE A WEST PALM BEACH FL 33405	C/O TOUCHSTONE WEBB MANAGEMENT 5710 S. DIXIE HIGHWAY. SUITE A WEST PALM BEACH FL 33405

3. Date Incorporated or Qualified: 05/11/1978

3a. Date of Last Report: 03/31/1995

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

City & State — 23

City & State — 28

Zip — 24 Country — 25

Zip — 29 Country — 30

4. FEI Number: 59-1968305 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WEBB-SALATA, KATHLEEN
% TOUCHSTONE WEBB MANAGEMENT
5710 S. DIXIE HIGHWAY, SUITE A
WEST PALM BEACH FL 33405

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Kathleen Salata 2/8/96
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD VANESS, ROBERT 2814 KIRK ROAD WEST PALM BEACH FL 33461	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD ROBERT SCHMIEDE 2858 KIRK ROAD LAKE WORTH, FL 33461	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP NELSON, PEARL 2944 KIRK ROAD WEST PALM BEACH FL 33461	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T LUHR, LISA 2960 KIK ROAD WEST PALM BEACH FL 33461	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HURLEY, MARCIA 2864 KIRK ROAD WEST PALM BEACH FL 33461	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D THOMAS SARKO 2974 KIRK ROAD LAKE WORTH, FL 33461	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pearl Nelson 2/7/96 (407)547-4001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Pearl Nelson