

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761322

FILED
May 23, 2008
Secretary of State

Entity Name: KENWOOD PARK ASSOCIATION, INC.

Current Principal Place of Business:

THOMAS G. ECKERTY
12734 KENWOOD LANE STE 89
FT. MYERS, FL 33907

New Principal Place of Business:

COMMERCIAL PROPERTY SPECIALISTS
12734 KENWOOD LANE STE 93
FT. MYERS, FL 33907

Current Mailing Address:

THOMAS G. ECKERTY
12734 KENWOOD LANE STE 89
FT. MYERS, FL 33907

New Mailing Address:

COMMERCIAL PROPERTY SPECIALISTS,
12734 KENWOOD LANE STE 93
FT. MYERS, FL 33907

FEI Number: 59-2358736 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COMMERCIAL PROPERTY SPECIALISTS, INC
12734 KENWOOD LN
SUITE 93
FORT MYERS, FL 33907 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: DT () Delete
Name: PROBE, LARRY,
Address: 12734 KENWOOD LN SW 9
City-St-Zip: FT. MYERS, FL

Title: PD () Delete
Name: DAWSON, WILLIAM
Address: 12734 KENWOOD LANE
City-St-Zip: FORT MYERS, FL 33907

Title: DS () Delete
Name: HAAS, LINDA
Address: 12220 FLINTLOCK LANE
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LINDA HAAS

DR

05/23/2008

Electronic Signature of Signing Officer or Director

Date