2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770921

FILED Apr 22, 2005 Secretary of State

Entity Name: KINGSWOOD ESTATES PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	SQ. WEST ICH, FL 32966	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX 9 VERO BCH	962 H., FL 32961				
FEI Number:	59-2562564	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
817 BEACH	ON, STEVE L HLAND BLVD. ACH, FL 32964	ATTOR US			
The above in the State		ubmits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE:					
	Electronic	Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ()[CARPENTER, SF 1561 56TH SQUA VERO BEACH, F	ARE WEST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P ()E BURNS, MICHAE 1570 56TH COUI VERO BEACH, F	रा	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () E CARNELL, RICH 1550 56GH COU VERO BEACH, F	RT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E GIARIZZI, SALVA 1400 56TH SQUA VERO BEACH, F	ARE WEST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () [KESSLER, ROBE 1430 56TH SQUA VERO BEACH, F	ARE EAST	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT KESSLER T 04/22/2005