

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001425

FILED
Apr 28, 2004
Secretary of State**Entity Name:** KEMPTON PARK AT GRAND OAKS NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**10033 9TH STREET NORTH
2ND FLOOR
SAINT PETERSBURG, FL 33716**New Principal Place of Business:****Current Mailing Address:**10033 9TH STREET NORTH
2ND FLOOR
SAINT PETERSBURG, FL 33716**New Mailing Address:****FEI Number:** 59-3716322**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RAMPART PROPERTIES, INC.
10033 9TH STREET NORTH
2ND FLOOR
SAINT PETERSBURG, FL 33716 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:** DP () Delete
Name: CRUM, ROBERT
Address: 10033 NINTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 337163804**Title:** VPD () Delete
Name: RESANOWITCH, SUE
Address: 10033 NINTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 337163804**Title:** STD () Delete
Name: LOUCHART, MIKE
Address: 10033 NINTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 337163804**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 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 CRUM

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date