

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2006 8:00 am
Secretary of State

02-23-2006 90009 020 ****61.25

DOCUMENT # N02000007600 1. Entity Name KENILWORTH CORNER PROPERTY ASSOCIATION, INC.					
Principal Place of Business 4854 SW 91ST CT. GAINESVILLE, FL 32608			Mailing Address 4854 SW 91ST CT. GAINESVILLE, FL 32608		
2. Principal Place of Business 1570 Lakeview Drive		3. Mailing Address 1570 Lakeview Drive			
Suite, Apt. #, etc. Suite 100		Suite, Apt. #, etc. Suite 100			
City & State Sebring, FL		City & State Sebring, FL		4. FEI Number 65-1197470	
Zip 33870		Country United States		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BUTTS, ROBERT P 4854 SW 91ST CT. GAINESVILLE, FL 32608		7. Name and Address of New Registered Agent Name Bill Boyd Street Address (P.O. Box Number is Not Acceptable) 1570 Lakeview Drive, Suite 100 City Sebring FL Zip Code 33870			
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 Bill Boyd, President 2/20/2006 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTTS, ROBERT P 4854 SW 91ST CT. GAINESVILLE, FL 32608	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President P/D Bill Boyd 1570 Lakeview Drive, Suite 100 Sebring, FL 33870	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D INGLE, KATHARINE C 4854 SW 91ST CT. GAINESVILLE, FL 32608	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President V John Riggs 1570 Lakeview Drive, Suite 100 Sebring, FL 33870	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUTTS, SUSAN E 4854 SW 91ST CT. GAINESVILLE, FL 32608	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary S Brenda Heston 1570 Lakeview Drive, Suite 100 Sebring, FL 33870	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer T Jacque Maxcy 1570 Lakeview Drive, Suite 100 Sebring, FL 33870	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director D C. Guy Maxcy 1570 Lakeview Drive, Suite 100 Sebring, FL 33870	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director D Linda Riggs 1570 Lakeview Drive, Suite 100 Sebring, FL 33870	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:			Bill Boyd, President/Director		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

ATTACHMENT 40016657

~~#~~ NO 2000007600

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

Director D Change
Jim Otterman
1570 Lakeview Drive, Suite 100
Sebring, FL 33870

Director
Richard Sinclair D Change
1570 Lakeview Drive, Suite 100
Sebring, FL 33870