

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007600

FILED  
Apr 08, 2009  
Secretary of State

**Entity Name:** KENILWORTH CORNER PROPERTY ASSOCIATION, INC.

**Current Principal Place of Business:**

1570 LAKEVIEW DR STE 100  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

1570 LAKEVIEW DR STE 100  
SEBRING, FL 33870

**New Mailing Address:**

**FEI Number:** 65-1197470

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOYD, BILL  
1570 LAKEVIEW DR STE 100  
SEBRING, FL 33870 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: PD ( ) Delete  
Name: BOYD, BILL  
Address: 1570 LAKEVIEW DR STE 100  
City-St-Zip: SEBRING, FL 33870

Title: VP ( ) Delete  
Name: RIGGS, JOHN  
Address: 1570 LAKEVIEW DR STE 100  
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete  
Name: OTTERMAN, JIM  
Address: 1570 LAKEVIEW DRIVE, SUITE 2  
City-St-Zip: SEBRING, FL 33870

Title: ST ( ) Delete  
Name: MAXCY, JACQUE  
Address: 1570 LAKEVIEW DR STE 100  
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete  
Name: MAXCY, C. GUY  
Address: 1570 LAKEVIEW DR STE 100  
City-St-Zip: SEBRING, FL 33870

Title: D ( ) Delete  
Name: RIGGS, LINDA  
Address: 1570 LAKEVIEW DR STE 100  
City-St-Zip: SEBRING, FL 33870

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: HESTON, DENNIS  
Address: 1570 LAKEVIEW DRIVE, SUITE 100  
City-St-Zip: SEBRING, FL 33870

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

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

Title: D (X) Change ( ) Addition  
Name: MATHENY, MARY J  
Address: 1570 LAKEVIEW DR STE 100  
City-St-Zip: SEBRING, FL 33870

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: JACQUE MAXCY

ST

04/08/2009

Electronic Signature of Signing Officer or Director

Date