

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007600

FILED
Mar 10, 2010
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
Name: BOYD, BILL
Address: 1570 LAKEVIEW DR STE 100
City-St-Zip: SEBRING, FL 33870

Title: VPD
Name: HESTON, DENNIS
Address: 1570 LAKEVIEW DR STE 100
City-St-Zip: SEBRING, FL 33870

Title: D
Name: RIGGS, LINDA
Address: 1570 LAKEVIEW DRIVE, SUITE 100
City-St-Zip: SEBRING, FL 33870

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: BILL BOYD

PD

03/10/2010

Electronic Signature of Signing Officer or Director

Date