2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State
03-06-2001 90007 042 ****61.25

DOCUMENT # N04157

1. Entity Name

KENSINGTON WALK CONDOMINIUM THREE ASSOCIATION, I

Principal Place of Business	Mailing Address
C/O RONALD E. D'ANNA, ESQ. 2300 GLADES RD., STE. 400 EAST TOWER BOCA RATON FL 33431 US	C/O RONALD E. D'ANNA, ESQ. 2300 GLADES RD., STE. 400 EAST TOWER BOCA RATON FL 33431 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
c/o Prime Management	c/o Prime Management
Suite, Apt #, etc.: 6300 Park of Commerce Blvd	Suite, Apt #, etc.: 6300 Park of Commerce Blvd
City & State: Boca Raton, Fl	City & State: Boca Raton, Fl
Zip: 33487 Country:	Zip: 33487 Country:

4. FEI Number 59-2494079 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
D'ANNA, RONALD E ESQ. MATTLIN & MISLOSKY 2300 GLADES RD., STE. 400 EAST TOWER BOCA RATON FL 33431	Name: MYRON SWATT Street Address (P.O. Box Number is Not Acceptable): 6300 PARK OF COMMERCE BLVD City: BOCA RATON FL Zip Code: 33487

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.

SIGNATURE _____ DATE 2/28/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PETTRETI, ADELSONE 6550 SOMMERSET DR, #208 BOCA RATON FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RAPAPORT, MEIR 6585 SOMERSET DR #202 BOCA RATON FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVPD PLEDGER, MAGGIE 6551 ARLEIGH COURT #204 BOCA RATON FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: MYRON SWATT PRES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #