2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006
Secretary of State

DOCUMENT# N05000003284

Entity Name: TOWNHOMES OF KENDALL POINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3300 UNIVERSITY DR
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3300 UNIVERSITY DR
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GERSON, GARY N
1645 PALM BEACH LAKES BLVD SUITE 1200
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

FIRST COAST ASSOCIATION MANAGMENT, LLC
11555 CENTRAL PARKWAY
SUITE 1103
JACKSONVILLE, FL 32224 US

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: MARGARET STOREY 03/24/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Change (X) Addition
Name: JANZIK, WAYNE
Address: 8647 BAYPINE RD STE 204
City-St-Zip: JACKSONVILLE, FL 32256

Title: VPD ( ) Change (X) Addition
Name: EISNER, JASON
Address: 8647 BAYPINE RD STE 204
City-St-Zip: JACKSONVILLE, FL 32256

Title: STD ( ) Change (X) Addition
Name: LEIKART, PAUL
Address: 8647 BAYPINE RD STE 204
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the 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: MARGARET STOREY CFO 03/24/2006
Electronic Signature of Signing Officer or Director Date