2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# N06933

Entity Name: KINGSLEY AT CENTURY VILLAGE CONDOMINIUM # I ASSOCIATION, INC.

Current Principal Place of Business:

13460 SW 10TH STREET
STE 101
PEMBROKE PINES, FL 33027 US

New Principal Place of Business:

Current Mailing Address:

13460 SW 10TH STREET
STE 101
PEMBROKE PINES, FL 33027 US

New Mailing Address:

FEI Number: 59-2842385 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OTTO, CHARLIE ESQ
STACEY & OTTO PA
2699 STIRLING RD STE C-207
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

OTTO, CHARLIE ESQ
2699 STIRLIING RD
STE C-207
FORT LAUDERDALE, FL 33312 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: _____ 01/16/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: FREEDMAN, JOYCE
Address: 850 SW 133RD TERR
City-St-Zip: PEMBROKE PINES, FL 33027

Title: T ( ) Delete
Name: OLINSKY, BURT
Address: 801 SW 133 TERRACE, #K206
City-St-Zip: PEMBROKE PINES, FL 33027

Title: P ( ) Delete
Name: LERNER, TRUDY
Address: 1347 SW 9TH STREET A-410
City-St-Zip: PEMBROKE PINES, FL 33027

Title: S ( ) Delete
Name: SLONE, ANN
Address: 13455 SW 9TH ST J-201
City-St-Zip: HOLLYWOOD, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: FREEDMAN, JOYCE
Address: 850 SW 133RD TERR, B118
City-St-Zip: PEMBROKE PINES, FL 33027

Title: T (X) Change ( ) Addition
Name: GOODMAN, SHIRLEY
Address: 801 SW 133 TERRACE, #K417
City-St-Zip: PEMBROKE PINES, FL 33027

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

Title: S (X) Change ( ) Addition
Name: GLIDE, CLAUDIA
Address: 13455 SW 9TH ST J-101
City-St-Zip: HOLLYWOOD, FL 33027

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: TRUDY LERNER P 01/16/2009
Electronic Signature of Signing Officer or Director — Date