2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# N08815

Entity Name: KENNEDY POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4747 SOUTH WASHINGTON AVENUE
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 167
4747 SOUTH WASHINGTON
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 59-2546397 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOATMAN, TODD CPA
2175-C CHENEY HIGHWAY
TITUSVILLE, FL 32780 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:	TD	( ) Delete
Name:	RICHARDS, JAMES	
Address:	4747 S WASHINGTON AVE #135	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	PD	( ) Delete
Name:	DEUEL, DANIEL	
Address:	4747 S WASHINGTON AVE #114	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	VPD	( ) Delete
Name:	BRADLEY, LINDA	
Address:	4747 S WASHINGTON AVE #146	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	DAL	( ) Delete
Name:	REINECKE, RALPH J	
Address:	4747 S WASHINGTON AVE, # 156	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	SD	( ) Delete
Name:	DAMOFF, JUDY	
Address:	4747 S WASHINGTON AVE	
City-St-Zip:	TITUSVILLE, FL 32780	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	MEDEIROS, CHARLOTTE	
Address:	4747 S WASHINGTON AVE	
City-St-Zip:	TITUSVILLE, FL 32780	

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: DANIEL DEUEL PD 01/30/2009

Electronic Signature of Signing Officer or Director — Date