2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47985

FILED Apr 17, 2009 Secretary of State

Entity Name: KENWOOD TOWN HOMES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2018 LAKEVIEW DR SEBRING, FL 33870 **Current Mailing Address: New Mailing Address:** 22014 LAKEVIEW DR. 2018LAKEVIEW DR. SEBRING, FL 33870 SEBRING, FL 33870 FEI Number: 65-0415655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TURNBULL, JAMES 2014 LAKEVIEW DR US SEBRING, FL 33870 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition TURNBULL, JAMES D Name: Name: 2014 LAKEVIEW DR Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: DVP () Delete Title: DST (X) Change () Addition JOAN, ROTH H Name: JOAN, ROTH H Name: Address: 2018 LAKEVIEW DR. Address: 2018 LAKEVIEW DR. City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: () Delete Title: () Change () Addition FORD, DAVID Name: Name: Address: 2004 LAKEVIEW DR Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: Title: DST () Delete Title: (X) Change () Addition Name: TURNBULL, CECILIOO Name: ENCHAUTEGUI, ESTHER 2014 LAKEVIEW DR. Address: 2014 LAKEVIEW DR. Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: () Delete Title: (X) Change () Addition STEVEN, LUNDY Name: Name: STEVEN, LUNDY 2002 LAKEVIEW DR. 2002 LAKEVIEW DR. Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip: SEBRING, FL 33870 Title: () Delete Title: () Change () Addition MALDONADO, IVAN Name: Name: Address: 2022 LAKEVIEW DR. Address: SEBRING, FL 33870 City-St-Zip: City-St-Zip:

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: JOAN H. ROTH DST 04/17/2009