

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 APR 26 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N92000000879
1. Corporation Name
KENSINGTON PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business: 5295 TOWN CENTER RD. STE. 200 BOCA RATON FL 33486 US
Mailing Address: 5295 TOWN CENTER RD STE 200 BOCA RATON FL 33486 US



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21. CMD management, Inc	26. CMD management, Inc	12/21/1992	65-0439973	Not Applicable
22. 3082 Jog Road	27. 3082 Jog Road	5. Certificate of Status Desired		\$8.75 Additional Fee Required
23. Lake Worth, FL	28. Lake Worth, FL	6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
24. 33467	29. 33467			
25. USA	30. USA			

9. Name and Address of Current Registered Agent
ISAACSON, WILLIAM K
5295 TOWN CENTER RD.
STE. 200
BOCA RATON FL 33486

10. Name and Address of New Registered Agent
81. Name: David L. Rosenthal
82. Street Address: CMD management, Inc.
83. 3082 Jog Road
84. City: Lake Worth, FL
85. Zip Code: 33467

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE: *David L. Rosenthal* DATE: 2/2/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	BERMAN, STANLEY	1.1 TITLE: Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 4373 KENSINGTON PARKWAY	LAKE WORTH FL 33467	1.2 NAME:	
CITY-ST-ZIP:		1.3 STREET ADDRESS:	
TITLE: VP	PRESS, MARVIN	1.4 CITY-ST-ZIP:	
STREET ADDRESS: 4429 KENSINGTON PARKWAY	LAKE WORTH FL 33467	2.1 TITLE: President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP:		2.2 NAME:	
TITLE: TD	LEVENSTEIN, SEYMOUR	2.3 STREET ADDRESS:	
STREET ADDRESS: 4493 KENSINGTON PARKWAY	LAKE WORTH FL 33467	2.4 CITY-ST-ZIP:	
CITY-ST-ZIP:		3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: SD	NASS, ROBERT	3.2 NAME:	
STREET ADDRESS: 4505 KENSINGTON PARKWAY	LAKE WORTH FL 33467	3.3 STREET ADDRESS:	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP:	
TITLE: D	KOLES, DONALD	4.1 TITLE: Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 4369 KENSINGTON PKWY	LAKE WORTH FL 33467	4.2 NAME:	
CITY-ST-ZIP:		4.3 STREET ADDRESS:	
TITLE:		4.4 CITY-ST-ZIP:	
NAME:		5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		5.2 NAME:	
CITY-ST-ZIP:		5.3 STREET ADDRESS:	
TITLE:		5.4 CITY-ST-ZIP:	
NAME:		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		6.2 NAME:	
CITY-ST-ZIP:		6.3 STREET ADDRESS:	
		6.4 CITY-ST-ZIP:	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Stanley Berman* 4/20/99 561-968-9369

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CR2E037 (11/98)