2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT (AR) FILED Feb 13, 2008 08:00 AN Secretary of State DOCUMENT # N93000005075 1. Entity Name KINGSTON OAKS HOMEOWNERS ASSOCIATION, INC. Principal Piace of Business Mailing Address 3858 KINGSTON OAKS COVE 3858 KINGSTON OAKS COVE OVIEDO FL 32765 OVIEDO FL 32765 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc Suite, Apt. #, etc 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number NO-T APPLICABLE Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SANTOMAURO, KEITH Street Address (P.O. Box Number is Not Acceptable) 3858 KINGSTON OAKS COVE OVIEDO FL 32765 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed carse of legistered agent and the Transplantace (NOTE: Registered Agont signal) re-ren i rod ween reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2008 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change Addition SANTOMAURO, KEITH NAME NAME 3858 KINSTON OAKS, COVE STREET ADDRESS STREET ADDRESS OVIEDO FL 32765 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delate ☐ Change Addition BURK, DAVID M NAME NAME 3886 KINGSTON OAKS COVE STREET AUDRESS STREET ADDRESS U00000826570 02/21/08-80053-OVIEDO FL 32765 CITY-ST-ZIP CHTY-ST-ZIP -025 61.25 TITLE Delete TITLE Change ☐ Addition NAME STRAUB, JOANN NAME 3851 KINGSTON OAK COVE STREET ADDRESS STREET ADDRESS OVIEDO FL 32765 CITY-ST-ZIP CITY-ST-ZiP SD TITLE Delete TITLE ■ Addition NAME QUINN, CYNTHIA NA JE STREET ADDRESS 3890 KINGSTON OAK COVE STREET ADDRESS OVIEDO FL 32765 CITY-ST-ZIP CITY-ST-ZIP Dalete THLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZP Delete TITLE ☐ Change Addition NAME NAME

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP