## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

7932 WILES RD CORAL SPRINGS FL 33067

C/O BENCHMARK PROPERTY MGMT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 21 1997 8:00am

Secretary of State

3a. Date of Last Report 04/04/1996

5353

3. Date Incorporated or Qualified 11/17/1993

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## N93000005183 (9) DOCUMENT #

## CLASSICS AT KENSINGTON II HOMEOWNERS ASSOCIATION , INC.

Mailing Address

7932 WILES ROAD

C/O BENCHMARK PROPERTY MGMT

CORAL SPRINGS FL 33067-2071

2. Principal Flace of Business 2a. Maili			iling Address				4.	FEI Number	Applied For									
21		26						65-0395305	Not Applicable									
Suite, Apt. 4	t, etc.	Suite,	Suite, Apt #, etc.				5.	Certificate of Status Desired	\$8.75 Additional									
22	*	27						Communication of Clarks Desired	Fee Required									
City & State City & S			State				6.	Election Campaign Financing	\$5.00 May Be									
23		28						Trust Fund Contribution	Added to Fees									
Ζιρ	Country	<del></del>		Coun	ntry		8.	This corporation has liability for intangible										
24 25 29 30					Florida Statutes Yes No													
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent  11 Name											
KAY & ROGER, PA					Kaye & Roger, P.A.  82 Street Address (P.O. Box Number is Not Acceptable)													
1500 W CYPRESS CREEK RD, #207					6261 N. V. 6th Way													
FT LAUDERDALE FL 33309					Suite 103													
						84 City 85 Zip Code												
						F.	<u>t. L</u>	Lauderdale FL	.     33309									
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																		
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																		
		of registered agent and title if applica	ble. (NOTE		Agen	nt signature rec	·											
12.		FLICERS AND DIRECTORS	DELETE	13.				ADDITIONS/CHANGES TO OFFICERS AN										
TITEE	PD NICHAEL		Proceed	1.1 TITL			P	011	☐ Change									
NAME	CONTE, MICHAEL	AUDT		1.2 NAN				ry Gibson										
STREET ADDRESS	10635 NW 47TH C					1		54 N. W. 47th Ct.										
CITY ST-ZIP	CORAL SPRINGS	FL	**	1.4 CIT		- ZIP	Cora	al Springs, FL 330	76									
TITLE	TD		DELETE	2.1 TITL			V		Change Addition									
NAME	LURIE, ALAN			2 2 NAN	ME			ce:Weiner										
STREET ADDRESS	4770 NW 106TH A			23 STR	REET			27 N. W. 48th St.										
CITY - ST - ZIP	CORAL SPRINGS I	FL		2 4 CIT				al Springs, FL 330										
TILLE	SD		DELETE	3.1 TITU	LE		S/D		Change Addition									
NAME	ZELINA, SARAH		•	3.2 NAN	ME		Phil	lip Bennis										
STREET ADDRESS	10671 NW 47TH C			3.3 STR	REET			01 N. W. 47th Ct.										
CITY-ST-ZIP	CORAL SPRINGS	FL		3.4. CIT				al Springs, FL 330										
TILE			DELETE	4.1 TITL			T/D	C	Change Addition									
NAME				4. 2 NA	ME			frey Dworkin										
STREET ADDRESS				4.3 STR	REET A			53 N. W. 48th St.										
CHY-SI-ZIP				4.4 C(T)				al Springs, FL 330										
TILE			☐ DELETE	5.1 TIT).	LE		D .		Change Addition									
NAME				5.2 NAN	ME			holas Adamo										
STREEL ADDRESS				5.3 \$18	REET			88 N. W. 48th St.										
C(TY+S1+ZIP				5.4 C(T)		- ZIP	Cora	al Springs, FL 330										
TIFLE			☐ DELETE	6.1 T(T).					Change Addition									
NAM8				6.2 NAN	ME													
STREET ADDRESS				6.3 STR	REET	address												
CHY-SI-ZIP				6.4 CIT														
14. I do 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																		
appéars ir	n Block 12 or Block 13 d	i changed, or on an attachn	nent with an add	ress.				an	appears in Block 12 or Block 13 if changed, or on an attachment with an address.									