FILED Feb 27, 2001 8:00 am

2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9300005183

CLASSICS AT KENSINGTON II HOMEOWNERS ASSOCIATION					Secretary of State			
CLASSIC	JS AT RENSINGTON II HOW	EOMNEUS WSSOCIATIO	JN 		02-27-2001 90320	039 ****61	.25	
Principal Plac	e of Business	Mailing Address						
C/O BENCHMARK PROPERTY MGMT 7932 WILES RD CORAL SPRINGS FL 33067 US		C/O BENCHMARK PROPERTY MGMT 7932 WILES ROAD CORAL SPRINGS FL 33067 US		1100401	BIE 1815 11111 ABIH ABIH BEH BE	1 2018 : 1118 : /1861 11	1176 1171 1 70 1	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THE	S SPACE		
City & State		City & State		4. FEI Numbe	Applied For Not Applicable			
Zip	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
• •	~-	المستوادي بيوا عاد السودي	Name	, — 	-	. ,		
KAY & ROGER, PA 6261 NW 6TH WAY			Street A	Street Address (P.O. Box Number is Not Acceptable)				
STE 103 FT LAUDERDALE FL 33309			City	y FL Zip Co		L Zip Code		
9 The above	named entity submits this statement for	r the purpose of changing its re	agistered office of	registered agent or bot	h, in the state of Florida			
SIGNATURE _	Stgnature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signat	ure required when reinstating)	DATE			
FILE NOW: FEE IS \$61.25				\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIE	RECTORS	11.	ADDITIONS/CH/	ANGES TO OFFICERS AND	DIRECTORS IN	10	
TITLE NAME	D GIBSON, J.R.	⊠ Delete	TITLE NAME	Director_A	damo, Nichol 48 St	as ^{□ Change}	Addition	
STREET ADDRESS CITY-ST-ZIP	10664 NW 47TH CT CORAL SPRINGS FL 33076		STREET ADDRESS CITY-ST-ZIP	Coral Spri	nas, FL 330	76		
TITUE NAME STREET ADDRESS	PD BENNIS, PHILIP 10601 NW 47 CT	☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition	
CITY-ST-ZIP	CORAL SPRINGS FL 33076		CITY-ST-ZIP. 🚗					
TITLE NAME	SD MILLER, JILL	☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	10622 NW 48 ST CORAL SPRINGS FL 33076		STREET ADDRESS CITY-ST-ZIP				· ·	
TITLE NAME	VD MEDNICK, LOIS	☐ Delete	TITLE.			☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	10627 NW 48TH ST CORAL SPRINGS FL 33076		STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS	DT MURRAY, JACK 10604 NW 48 ST	☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	☐ Addition {	
CITY-ST-ZIP	CORAL SPRINGS FL 33076		CITY-ST-ZIP					
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	☐ Addition	

12. 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 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 alidress, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

JACK O. MURRAY TRANS 2/7/01
Date Dayline Phone #