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2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State
03-23-2001 90006 010 ****61.25

DOCUMENT # N94000001212

2. Entity Name

KENSINGTON GREEN HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1189 SAWGRASS CORPORATE PKWY P. O. BOX 189013 SUNRISE FL 33323 US	1189 SAWGRASS CORPORATE PKWY SUITE 408 SUNRISE FL 33323 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0540568 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COLLECTOL OF FLORIDA, INC. % BERTA FAIRBANK 13950 -105TH ST FELLSMERE FL 32948	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

SIGNATURE Berta Fairbank 3/8/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO ~~OFFICERS AND DIRECTORS~~ IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCNAIR, RONALD L. 11172 NW 46TH DRIVE CORAL SPRINGS FL 33076	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	Director McNair, Ronald L. 11172 NW 46 Drive Coral Springs, FL 33076	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD DIDIA, ROBERT 11043 NW 46TH DRIVE CORAL SPRINGS FL 33076	☐ Delete	TITLE DP NAME STREET ADDRESS CITY-ST-ZIP	President DiDia, Robert 11043 NW 46 Drive Coral Springs, FL 33076	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HAEMMERLE, CARL H. 11230 NW 46TH DRIVE CORAL SPRINGS FL 33076	☐ Delete	TITLE DVP NAME STREET ADDRESS CITY-ST-ZIP	Vice President Haemmerle, Carl H. 11230 NW 46 Drive Coral Springs, FL 33076	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOOTH, DENNIS 11145 NW 46TH DR CORAL SPRINGS FL 33076	☒ Delete	TITLE DT NAME STREET ADDRESS CITY-ST-ZIP	Treasurer DeMarco, Deborah 11290 NW 46 Drive Coral Springs, FL 33076	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE DS NAME STREET ADDRESS CITY-ST-ZIP	Secretary Tocpalidee, Bonnie 11103 NW 46 Drive Coral Springs, FL 33076	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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 address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3-8-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #