NONPROFIT CORPORATION ANNUAL REPORT

1997



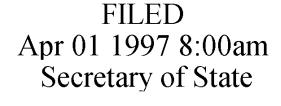
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	N96000005182 (8	8

THE HAMLET AT KENSINGTON CONDOMINIUM ASSOCIATION





, ING.										
Principal Place of Business Mailing Address					a received out recire over going ordin	64111 65 111 66 1	IN	YY 18210 1180 1881		
% 600 FIFTH AVENUE SOUTH SUITE 207 NAPLES FL 34102 % 600 FIFTH AVENUE SOUTH SUITE 207 NAPLES FL 34102				ПН				<u> </u>		
MAPLES PL 34	102	MATECO 1	. 54102				3. Date incorporated or Qualified 10/09/1996	3a. Date	e of Last I	Report
⊢	ace of Business	2a. Mailing	Address				4. FEI Number		I A	pplied For
21		26				<u> </u>	59-3415289			lot Applicable
Suite, Apt. i		27	pt. #, etc.				5. Certificate of Status Desired		Fee R	Additional Required
City & State	В	City & S	state				6. Election Campaign Financing	П		May Be
Zip	Country	28 Zip		Coun	itrv		Trust Fund Contribution			to Fees
24	25	29	ļ,	30	y		This corporation has liability for Florida Statutes		ax under: No	8. 199.032,
2-1	9. Name and Address of Curr			<u></u>			10. Name and Address of New Re			
				6	B1	Name				
	ER, CAROL R			ļ.	92	Street Ad	address (P.O. Box Number is Not Acceptable)			
	TH AVENUE SOUTH				B3					
SUITE 2	207 S FL 34102					······				
}				ſ	84	City		FL	[] [Code
, 11. Pursuant t office or re agent. Lar	to the provisions of Sections 617.0 egistered agent, or both, in the Starn familiar with, and accept the ob-	502 and 617.1508, ate of Florida. Such ligations of, Section	Florida Statutes change was au 617,0503, Flor	s, the about horized ida Statu	by tes	-named co the corpor	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of o	thanging intment a	its registered s registered
I SIGNATURE: ¶	\				_					
12.	Signature, typed or printed name of registered OFFICERS A	AND DIRECTORS	E. (NOTE:	13.	Ager	ni signature rec	ulred when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND	DIRECTO	RS IN 12
TITLE	D		DELETE	1.1 TITL	Æ	F			Change	
NAME	BRUGGER, JOHN N			1.2 NAA	ME .		RUGGER, JOHN N.		•	
STREET ADDRESS	600 FIFTH AVENUE SOUT	H, SUITE 207		1.3 STR	EET A	ADDRESS 6	00 Fifth Avenue South	, Suit	e 207	
CITY-ST-ZIP	NAPLES FL 34102			1.4 CITY	y-\$1	T-ZIP N	aples, Florida 34102			
TITLE	-B-		DELETE	2.1 TITL	.E				Change	X Addition
NAME	STEINER, ARLETTE		•	2.2 NAM	AE.		DuBOIS, DONALD			
STREET ADDRESS	600 FIFTH AVENUE 60UT	H, SUITE 207		2.3 STR	EEY /		3270 Hamlet Drive, #1			
CITY-ST-ZIP	NAPLES FL 04102		 	2. 4 CIT		1-81	Naples, Florida 34105			
TITLE	D PROPERTY FOR		DELETE	3.1 TITL			T	Ĺ	Change	X Addition
NAME	STIER, ERIC	U CUITE AAT		3.2 NAN			TIER, ERIC		. 00**	
STREET ADDRESS	600 FIFTH AVENUE SOUT	n, 5011E 20/				1 32	00 Fifth Avenue South aples, Florida 34102	, Sult	e 207	
CITY - ST - ZIP	NAPLES FL 34102		DELETE	3.4. CIT		T-ZIP IN	apres, from 34102		Change	Addition
TITLE			L DECEME	4.1 TiT(ł		,	"" CHRIGH	Martin
NAME STREET ADURESS				4.2 NA		ADORESS				
City-ST-ZIP				4.4 CIT		ľ				
TITLE			DELETE	5.1 111		1 - Eri			Change	Addition
NAME				5.2 NAS		!		•	. •	
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				5.4 CIT						
TITLE			DELETE	6.1 TITE					Change	Addition
NAME]				6.2 NAM	ME	}		•	.	
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				6.4 CIT						
	by certify that the information supp	lied with this filing o	does not qualify				ed in Section 119.07(3)(i), Florida Statute	s. I further	certify the	at 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.