2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N97000002041



Apr 23, 2003 8:00 am § Secretary of State

FILED

TOWNHOMES AT KENSINGTON HOMEOWNERS ASSOCIATION, INC.					0.	04-23-2003 90254 005 ****61.25			
UNIVERSITY PROPERTIES. INC. UNIV 7001 TEMPLE TERRACE HWY 7001		7001 TEMPLE TERRAC	Mailing Address NIVERSITY PROPERTIES. INC. 001 TEMPLE TERRACE HWY - EMPLE TERRACE FL 33637		1201/15: 1/0 (0)	12 (8 8 2) 88 1) 881) 4	B BIII 83 118 11811 88111 8	1884 19 1 1881	
2. Principal Place of Business 3. Ma		3. Mailing Address	Mailing Address						
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & Star	te -	City & State	City & State			4. FEI Number 59-3455554 Applied For Not Applicable			
Zip Country		Zip Co		untry	5. Certificate of Sta	atus Desired	\$9.75 ^-	Iditional	
6. Name and Address of Current Registere		Registered Agent	d Agent		7. Name and Adda	7. Name and Address of New Registered Agent			
				Name	<u> </u>				
DURATE, ANTONIO 11959 N FLOIRDA AVENUE TAMPA FL 33612				Street Address (P.O. Box Number is Not Acceptable)					
70				City			Zip Coo	de	
8. The above named entity submits this statement for the purpose of changing its register									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent and title if applicable. 9. Election Campaigr Trust Fund Contrib				inancing	\$5.00 May Be Added to Fees	Make C	Check Payable		
10.	OFFICERS AND DIF	ECTORS	11.		ADDITIONS/CHANGE	S TO OFFICERS AF	ND DIRECTORS II	V 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEADEN, ERNEST 727 KENSINGTON LAKE CIRCLE BRANDON FL 33511	☐ Delete		i i			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GEBBIA, DONNA 351 KENSINGTON LAKE CIRCLE BRANDON FL 33511	Delete		ET ADDRESS 4	VP/D SALOG TON 732 N. DAWA LANT CITY,) MEADOW) FL 3356	COURT	∑ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PETERSON, RUTH 739 KENSINGTON LAKE CIRCLE BRANDON FL 33511	Delete			TID CHULOT, CAI ZS KENSING BRANDON, I		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		:			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ 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 of 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 attachmen with an address, with a loth the information 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 of 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 a loth to the corporation of the c

SIGNATURE: