

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004570

FILED
Apr 21, 2008
Secretary of State

Entity Name: KENSINGTON GOLF & COUNTRY CLUB, INC.

Current Principal Place of Business:

2700 PINE RIDGE ROAD
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2700 PINE RIDGE ROAD
NAPLES, FL 34109

New Mailing Address:

FEI Number: 65-0418449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'BRIEN, THOMAS
5024 KENSINGTON HIGH ST
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARMSTRONG, BRUCE
Address: 4813 KESWICK WAY
City-St-Zip: NAPLES, FL 34105

Title: V () Delete
Name: EVANS, CHESTER
Address: 4040 KENSINGTON HIGH STREET
City-St-Zip: NAPLES, FL 34103

Title: T () Delete
Name: THOMPSON, CLIFF
Address: 2984 ST. BARNABAS COURT
City-St-Zip: NAPLES, FL 34105

Title: S () Delete
Name: O'BRIEN, THOMAS
Address: 5024 KENSINGTON HIGH STREET
City-St-Zip: NAPLES, FL 34105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EVANS, CHESTER
Address: 4040 KENSINGTON HIGH STREET
City-St-Zip: NAPLES, FL 34105

Title: V (X) Change () Addition
Name: TIPPETT, PAUL
Address: 2625 FINCHLEY LANE
City-St-Zip: NAPLES, FL 34105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS O'BRIEN

S

04/21/2008

Electronic Signature of Signing Officer or Director

Date