

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006606

FILED
Apr 03, 2008
Secretary of State

Entity Name: KENSINGTON ESTATES HOMEOWNERS' ASSOCIATION OF HILLSBOROUGH, INC.

Current Principal Place of Business:

1443 KENSINGTON WOODS DR
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 658
LUTZ, FL 33548

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADILL, DAVID J
1443 KENSINGTON WOODS DR
LUTZ, FL 33549 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: GATES, TOM
Address: 1416 KENSINGTON WOODS DR
City-St-Zip: LUTZ, FL 33549

Title: SD () Delete
Name: DEMARIA, MELISSA
Address: 1456 KENSINGTON WOODS DR.
City-St-Zip: LUTZ, FL 33549

Title: S () Delete
Name: EUBANK, BRUNY
Address: 1406 KENSINGTON WOODS DR
City-St-Zip: LUTZ, FL 33549

Title: T () Delete
Name: MADILL, DAVID
Address: 1443 KENSINGTON WOODS DR
City-St-Zip: LUTZ, FL 33549

Title: D () Delete
Name: DEMARCIA, MELISSA
Address: 1456 KENSINGTON WOODS DR
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BREWER, RICK
Address: 1448 KENSINGTON WOODS DR
City-St-Zip: LUTZ, FL 33549

Title: VP (X) Change () Addition
Name: BARNES, ERIC
Address: 1450 KENSINGTON WOODS DR.
City-St-Zip: LUTZ, FL 33549

Title: SEC (X) Change () Addition
Name: MATZA, SUE
Address: 1451 KENSINGTON WOODS DR
City-St-Zip: LUTZ, FL 33549

Title: TRSR (X) Change () Addition
Name: REIDY, MICHAEL
Address: 1405 KENSINGTON WOODS DR
City-St-Zip: LUTZ, FL 33549

Title: DIR (X) Change () Addition
Name: SHEPHERD, KEN
Address: 1447 KENSINGTON WOODS DR
City-St-Zip: LUTZ, FL 33549

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: MICHAEL J REIDY

TRSR

04/03/2008

Electronic Signature of Signing Officer or Director

Date