2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007 8:00 am
Secretary of State
03-29-2007 90019 015 ****61.25

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1. Entity Name
KENSINGTON PARK HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1950 LEE RD., STE. 212 WINTER PARK, FL 32789	1950 LEE RD., STE. 212 WINTER PARK, FL 32789

02082007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Greystone Mgm't Co.	Greystone Mgm't Co.
Suite, Apt. #, etc.: 1936 Lee Rd. Ste 250	Suite, Apt. #, etc.: 1936 Lee Rd. Ste 250
City & State: Winter Park, FL	City & State: Winter Park, FL
Zip: 32789 Country: USA	Zip: 32789 Country: USA

4. FEI Number 59-3573195 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GREYSTONE MANAGEMENT COMPANY
1950 LEE RD., STE. 212
WINTER PARK, FL 32789

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BARTON, ROBERT 4823 KEENLAND CIR ORLANDO, FL 32819	☐ Delete	SECRETARY STEGMAN, TERRI 4904 KEENLAND CIRCLE ORLANDO FL 32819	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STR SHAW, FRED 4860 KENNELAND CIR ORLANDO, FL 32819	☒ Delete	TREASURER KROHN, BOB 4878 KEENLAND CIRCLE ORLANDO FL 32819	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SARGENT, JEFFREY 4946 KENSINGTON PARK DR ORLANDO, FL 32819	☐ Delete	DIRECTOR BEST, DENNIS 4867 KEENLAND CIRCLE ORLANDO FL 32819	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	DIRECTOR BOONE, JOHN 4839 KENSINGTON PARK DRIVE ORLANDO FL 32819	☐ Change	☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	DIRECTOR HEIKKINEN, GLEN 4841 KEENLAND CIRCLE ORLANDO FL 32819	☐ 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 exemptions contained 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 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: _____ 3/15/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #