

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002360

FILED  
Apr 27, 2005  
Secretary of State

**Entity Name:** WELLINGTON PLACE AT KENSINGTON COMMONS ASSOCIATION, INC.

**Current Principal Place of Business:**

SOUTHWEST PROP. MGMT.  
1044 CASTELLO DR., STE #206  
NAPLES, FL 34103

**New Principal Place of Business:**

C/O R&P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104

**Current Mailing Address:**

SOUTHWEST PROP. MGMT.  
1044 CASTELLO DR., STE #206  
NAPLES, FL 34103

**New Mailing Address:**

C/O R&P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104

FEI Number: 59-3570190

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SOUTHWEST PROPERTY MANAGEMENT CORP  
1044 COSTELLO DRIVE #206  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

R&P PROPERTY MANAGEMENT  
265 AIRPORT RD S  
NAPLES, FL 34104 US

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: GLENN CARROLL

04/27/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: JOHNSON, FRANK  
Address: 4952 WESTCHESTER CT., #3902  
City-St-Zip: NAPLES, FL 34105

Title: SVPD ( ) Delete  
Name: MCKINNEY, WILLIAM  
Address: 4445 DOVER CT. #804  
City-St-Zip: NAPLES, FL 34105

Title: PD ( ) Delete  
Name: BIRrane, JOHN  
Address: 4776 ALBERTON CT., #2704  
City-St-Zip: NAPLES, FL 34105

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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 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: JOHN BIRrane

PRES

04/27/2005

Electronic Signature of Signing Officer or Director

Date