

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078784

**FILED**  
**Jun 20, 2007**  
**Secretary of State**

**Entity Name:** KENSINGTON DEVELOPMENT OF NAPLES, INC.

**Current Principal Place of Business:**

365 FIFTH AVENUE SOUTH #201  
NAPLES, FL 34102

**New Principal Place of Business:**

3530 KRAFT ROAD  
SUITE 300  
NAPLES, FL 34105

**Current Mailing Address:**

365 FIFTH AVENUE SOUTH #201  
NAPLES, FL 34102

**New Mailing Address:**

3530 KRAFT ROAD  
SUITE 300  
NAPLES, FL 34105

**FEI Number:** 59-3680874

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ANTARAMIAN, JACK J  
365 FIFTH AVENUE SOUTH #201  
NAPLES, FL 34102 US

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

ANTARAMIAN, JACK J  
3530 KRAFT ROAD  
SUITE300  
NAPLES, FL 34105 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: \_\_\_\_\_

06/20/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: ANTARAMIAN, JACK J  
Address: 365 FIFTH AVENUE SOUTH #201  
City-St-Zip: NAPLES, FL 34102

Title: V ( ) Delete  
Name: MACIVOR, THOMAS A  
Address: 365 5TH AVE.S, STE 201  
City-St-Zip: NAPLES, FL 34102

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

Title: PTD (X) Change ( ) Addition  
Name: ANTARAMIAN, JACK J  
Address: 3530 KRAFT ROAD, SUITE 300  
City-St-Zip: NAPLES, FL 34105

Title: V (X) Change ( ) Addition  
Name: MACIVOR, THOMAS A  
Address: 3530 KRAFT ROAD , SUITE 300  
City-St-Zip: NAPLES, FL 34105

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS MACIVOR

V

06/20/2007

Electronic Signature of Signing Officer or Director

Date