

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000117243

FILED  
Jan 16, 2007  
Secretary of State

**Entity Name:** KENSINGTON REALTY INVESTMENT GROUP, INC.

**Current Principal Place of Business:**

525 SOUTH FLAGLER DRIVE  
SUITE 301  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

300 GOLFVIEW ROAD  
SUITE 106  
NORTH PALM BEACH, FL 33408

**New Mailing Address:**

**FEI Number:** 04-3686976

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASEY, PATRICK J ESQ.  
515 NORTH FLAGLER DRIVE, 19TH FLOOR  
19TH FLOOR NORTHBRIDGE TOWER 1  
WEST PALM BEACH, FL 33401 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KENSINGTON, KERRY A  
Address: 300 GOLFVIEW ROAD, APT 106  
City-St-Zip: NORTH PALM BEACH, FL 33408

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

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 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: KERRY A. KENSINGTON

PRES

01/16/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date