2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117530

Name:

Address: City-St-Zip: MATTHEWS-GRAY, JUDY

BOCA RATON, FL 33487

1000 CLINT MOORE RD, STE 110

FILED Apr 29, 2009 Secretary of State

Entity Nan	ne: KENCO (COMMUNITIES AT THE METR	ROPOLITAN, INC.		
Current Principal Place of Business:			New Principal Place	e of Business:	
	T MOORE RD ON, FL 3348				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1000 CLINT MOORE RD, STE 110 BOCA RATON, FL 33487					
FEI Number:	20-0616139	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
SHEPARD, JONATHAN L 5355 TOWN CENTER RD, STE 801 BOCA RATON, FL 33486 US			1000 CLINT MOORE STE 110	FINKELSTEIN, RICHARD 1000 CLINT MOORE RD STE 110 BOCA RATON, FL 33487 US	
The above in the State		submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: RICHARD FINKELSTEIN				04/29/2009	
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FINKELSTEIN,	OORE RD, STE 110	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ENDELSON, KI	OORE RD, STE 110	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()	Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JUDY MATTHEWS GRAY D 04/29/2009