2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State 03-17-2004 90031 012 ***150.00 **DOCUMENT # P98000005196** 1. Entity Name KENSINGTON REAL ESTATE, INC. 94030589 Principal Place of Business Mailing Address 1233 STONEHURST WAY 1233 STONEHURST WAY TALLAHASSEE, FL 32312-1066 TALLAHASSEE, FL 32312-1066 2. Principal Place of Business 3. Mailing Address 1328 MOSSWOOD CHASE 1328 MOSSWOOD CHASE Suite, Apt. #, etc. Suite, Apt. #, etc. 03032004 CR2E034 (10/03) Chg-P City & State TALLASHASSEE, FL City & State 4. FEI Number Applied For TALLAHASSEE, FL 59-3994153 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 32312-3952 32312-3952 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WHITFIELD, KENNETH M Street Address (P.O. Box Number is Not Acceptable) 1328 MOSSWOOD CHASE 1233 STONEHURST WAY TALLAHASSEE, FL 32312-1066 City TALLAHASSEE Zip Code 32312-8. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Delete TITLE Change ☐ Addition TITLE WHITFIELD, KENNETH NAME NAME STREET ADDRESS STREET ADDRESS 1233 STONEHURST WAY 1328 MOSSWOOD CHASE CITY-ST-ZIP TALLAHASSEE, FL 323121066 CITY-ST-ZIP TALLAHASSEE, FL 32312-3952 Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition ☐ Delete ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Сhange Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3Xi), 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 607, 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.

KENNETH WHITFIELD

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

Mar 17, 2004 8:00 am

Daytime Phone #