Apr 30, 2003 8:00 am
Secretary of State
04-30-2003 90132 029 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000070483

1. Entity Name
KENSINGTON FINANCIAL SERVICES, INC.

11029572

Principal Place of Business	Mailing Address
652 SOUTH PINE MEADOW DRIVE DEBARY, FL 32713	652 SOUTH PINE MEADOW DRIVE DEBARY, FL 32713

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3526280 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Booth ~~SMITH~~, AUDREY T 9707 VOYLES LOOP ROAD POLK CITY, FL 33868	Name: Audrey T. Booth Street Address (P.O. Box Number is Not Acceptable): 9707 Voyles Loop City: Polk City FL Zip Code: 33868

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: Audrey J. Booth — Date: 4/28/03

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD Booth ~~SMITH~~, AUDREY T 9707 VOYLES LOOP ROAD POLK CITY, FL 33868 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Booth, Audrey T. 9707 Voyles Loop Polk City, FL 33868 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E054 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of this 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.

SIGNATURE: Audrey J Booth — 4/28/03 — 863-984-8552

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #