2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735814

Entity Name: KINGSWOOD, PHASE I, INC.

Current Principal Place of Business:

2950 SE OCEAN BLVD. CLUBHOUSE PHASE 1 STUART, FL 34996

Current Mailing Address:

C/O COASTAL PROPERTY MANAGEMENT 10 SE CENTRAL PARKWAY SUITE 100 STUART, FL 34994 US

FEI Number: 59-1695575 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORNETT, JANE

401 EAST OSCEOLA ST. 1SRT FLOOR

STUART, FL 34994 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: JANE CORNETT 03/22/2017

Electronic Signature of Registered Agent

Date

FILED Mar 22, 2017

Secretary of State

CC1987786193

Officer/Director Detail:

PRESIDENT Title Title DIRECTOR SOBOLESKI, GENE Name Name EVERETT, TOM

Address C/O COASTAL PROPERTY Address C/O COASTAL PROPERTY

> MANAGEMENT MANAGEMENT

10 SE CENTRAL PARKWAY SUITE 100 10 SE CENTRAL PARKWAY SUITE 100

City-State-Zip: City-State-Zip:

TREASURER Title Title DIRECTOR

S00S, TONY HUFNAGEL, CARL Name Name

Address C/O COASTAL PROPERTY Address C/O COASTAL PROPERTY

MANAGEMENT MANAGEMENT

10 SE CENTRAL PARKWAY SUITE 100 10 SE CENTRAL PARKWAY SUITE 100

STUART FL 34994

City-State-Zip: STUART FL 34994 STUART FL 34994 City-State-Zip:

Title **SECRETARY**

Name STEWART, HILDA MAE

STUART FL 34994

Address C/O COASTAL PROPERTY MANAGEMENT

10 SE CENTRAL PARKWAY SUITE 100

City-State-Zip: STUART FL 34994

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

03/22/2017 SIGNATURE: GENE SOBOLESKI **PRESIDENT**