## 2015 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:** 

543 NW LAKE WHITNEY PLACE SUITE 101 PORT ST LUCIE, FL 34986

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 03/31/2015

Electronic Signature of Registered Agent

Date

FILED Mar 31, 2015

**Secretary of State** 

CC0345977903

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

Name WHITE, MARCIA Name DUNN, DAVID

Address 2950 SE OCEAN BLVD. BLDG. 1-9 Address 2950 SE OCEAN BLVD. UNIT 7-4

City-State-Zip: STUART FL 34996 City-State-Zip: STUART FL 34996

Title SD Title PRESIDENT AND TREASURER

Name STEWART, HILDA M Name BERARDUCCI, LOU

Address 2950 SE OCEAN BLVD. UNIT 12-6 Address 2950 SE OCEAN BLVD. BLDG. 13-6

City-State-Zip: STUART FL 34996 City-State-Zip: STUART FL 34996

TitleVPTitleDIRECTORNameWURSTER, MARVINNameCUSICK, JOE

Address 2950 SE OCEAN BLVD. BLDG.8-4 Address 2950 SE OCEAN BLVD.-BLDG.5-5

City-State-Zip: STUART FL 34996 City-State-Zip: STUART FL 34996

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.

SIGNATURE: LOUIS D. BERARDUCCI

**PRESIDENT** 

03/31/2015