

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763014

FILED
Mar 31, 2022
Secretary of State
2212600336CC**Entity Name:** THE KNOLLS OF KINGS POINT CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL
1904 CLUBHOUSE DR
SUN CITY CENTER, FL 33573**Current Mailing Address:**FIRST SERVICE RESIDENTIAL
1904 CLUBHOUSE DR
SUN CITY CENTER, FL 33573 US**FEI Number: 59-2529057****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**APPLETON REISS
215 N HOWARD AVE
SUITE 200
TAMPA, FL 33606 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:** ERIC APPLETON**03/31/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRESIDENT
Name SPOONER, CHRISTINE
Address 422 LAKEPOINT CT
City-State-Zip: SUN CITY CENTER FL 33573Title VP
Name LATHROP, HELEN
Address 2008-60 HEINTZMAN ST
City-State-Zip: TORONTO M6P 5A1Title DIRECTOR
Name DITTMAR, KEVIN
Address 424 LAKEPOINT CT
City-State-Zip: SUN CITY CENTER FL 33573Title DIRECTOR
Name STRAUSS, TOM
Address 407 LAKEPOINT CT
City-State-Zip: SUN CITY CENTER FL 33573Title TREASURER
Name HUGHES, NORMAN
Address 407 BLOOM CT
City-State-Zip: SUN CITY CENTER FL 33573Title DIRECTOR
Name KLEIN, ADELLA
Address 405 BLOOM CT
City-State-Zip: SUN CITY CENTER FL 33573

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: CHRISTINE SPOONER**PRESIDENT****03/31/2022**

Electronic Signature of Signing Officer/Director Detail

Date