19 SUNSET LA LAKE PLACID,				
Current Mai	ling Address:			
P.O. BOX 26 LAKE PLAC	606 ID, FL 33862-2606			
FEI Number: 59-2389018			Certificate of Status Desired: Yes	
Name and A	Address of Current Registered Agent:			
WILLIAMS, JAN 19 SUNSET LA LAKE PLACID,				
The above name	d entity submits this statement for the purpose of changing its reg	stered office or regis	tered agent, or both, in the State of Florida.	
SIGNATURE	E: JANIE WILLIAMS		01/	/29/2021
	Electronic Signature of Registered Agent			Date
	Electronic Signature of Registered Agent			Dale
Officer/Dire				Dale
Officer/Dire Title		Title	PRESIDENT, DIRECTOR	Dale
	ctor Detail :	Title Name	PRESIDENT, DIRECTOR WILLIAMS, JANIE	Dale
Title	ctor Detail : DIRECTOR/SECRETARY		·	Dale
Title Name	ctor Detail : DIRECTOR/SECRETARY STEADHAM, JANET 36 SUNSET LN	Name	WILLIAMS, JANIE	Date
Title Name Address	ctor Detail : DIRECTOR/SECRETARY STEADHAM, JANET 36 SUNSET LN	Name Address	WILLIAMS, JANIE P.O. BOX 3123	Dale
Title Name Address City-State-Zip:	ctor Detail : DIRECTOR/SECRETARY STEADHAM, JANET 36 SUNSET LN LAKE PLACID FL 33852	Name Address City-State-Zip:	WILLIAMS, JANIE P.O. BOX 3123 LAKE PLACID FL 33862	Dale
Title Name Address City-State-Zip: Title	ctor Detail : DIRECTOR/SECRETARY STEADHAM, JANET 36 SUNSET LN LAKE PLACID FL 33852 TREASURE/DIRECTOR	Name Address City-State-Zip: Title	WILLIAMS, JANIE P.O. BOX 3123 LAKE PLACID FL 33862 DIRECTOR, VP	Dale
Title Name Address City-State-Zip: Title Name	Ctor Detail : DIRECTOR/SECRETARY STEADHAM, JANET 36 SUNSET LN LAKE PLACID FL 33852 TREASURE/DIRECTOR FORTIER, JEANNE M P.O. BOX 2606	Name Address City-State-Zip: Title Name Address	WILLIAMS, JANIE P.O. BOX 3123 LAKE PLACID FL 33862 DIRECTOR, VP TRUDEL, JEFF	Dale
Title Name Address City-State-Zip: Title Name Address	Ctor Detail : DIRECTOR/SECRETARY STEADHAM, JANET 36 SUNSET LN LAKE PLACID FL 33852 TREASURE/DIRECTOR FORTIER, JEANNE M P.O. BOX 2606	Name Address City-State-Zip: Title Name Address	WILLIAMS, JANIE P.O. BOX 3123 LAKE PLACID FL 33862 DIRECTOR, VP TRUDEL, JEFF 22 SUNSET LANE	Dale

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: JEANNE FORTIER

18 SUNSET LANE

City-State-Zip: LAKE PLACID FL 33852

Address

TREASURER

01/29/2021 Date

Electronic Signature of Signing Officer/Director Detail

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02585

Entity Name: KINGSWOOD MANOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

FILED Jan 29, 2021 Secretary of State 2025170033CC

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