

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34888

Entity Name: FEDERATION OF KINGS POINT ASSOCIATIONS, INC.**Current Principal Place of Business:**FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
SUN CITY CENTER, FL 33573**Current Mailing Address:**FIRST SERVICE RESIDENTIAL
1904 CLUBHOUSE DRIVE
SUN CITY CENTER, FL 33573 US**FEI Number:** 59-2975259**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVE
TAMPA, FL 33602 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:** BUSH ROSS, PA**03/29/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name ARGOTT, LIZ
Address FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name O'NEILL, MARTY
Address FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip: SUN CITY CENTER FL 33573

Title SECRETARY
Name MEEKER, MARYANN
Address FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip: SUN CITY CENTER FL 33573

Title VP
Name BARDELL, MIKE
Address FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip: SUN CITY CENTER FL 33573

Title D
Name HUFTEN, CHUCK
Address FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip: SUN CITY CENTER FL 33573

Title TREASURER
Name PIPER, BILL
Address FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name HAMILTON, MAUREEN
Address FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR
Name MUSHOLT, WAYNE
Address FIRST SERVICE RESIDENTIAL
1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip: SUN CITY CENTER FL 33573

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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: LIZ ARGOTT**PRESIDENT****03/29/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MURPHY, TOM
Address	FIRST SERVICE RESIDENTIAL 1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip:	SUN CITY CENTER FL 33573