

2020 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, P.A.
1801 N HIGHLAND AVE
TAMPA, FL 33602-2656 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

Title	PRESIDENT
Name	SETZER, RYAN
Address	FIRST SERVICE RESIDENTIAL 1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip:	SUN CITY CENTER FL 33573

Title	DIRECTOR
Name	MASSIMEI, GUIDO (RICK)
Address	FIRST SERVICE RESIDENTIAL 1902 CLUBHOUSE DRIVE SUITE A
City-State-Zip:	SUN CITY CENTER FL 33573

Title	DIRECTOR
Name	HECTOR, DAN
Address	FIRST SERVICE RESIDENTIAL 1902 CLUBHOUSE DR SUITE A
City-State-Zip:	SUN CITY CENTER FL 33573

Title	DIRECTOR
Name	MCGRAW, DAVE
Address	FIRST SERVICE RESIDENTIAL 1902 CLUBHOUSE DR SUITE A
City-State-Zip:	SUN CITY CENTER FL 33573

Title	VP
Name	DAVIDSON, JACK
Address	FIRST SERVICE RESIDENTIAL 1902 CLUBHOUSE DR SUITE A
City-State-Zip:	SUN CITY CENTER FL 33573

Title	DIRECTOR
Name	RICKETTS, NOREEN
Address	FIRST SERVICE RESIDENTIAL 1902 CLUBHOUSE DR 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: RYAN SETZER**PRESIDENT****03/23/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	REZOAGLI, FRANK
Address	1902 CLUBHOUSE DR
City-State-Zip:	SUN CITY CENTER FL 33573