2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 715987

1. Entity Name

KING'S WAY CONDOMINIUM APTS., INC.

KINGSWAY CONDOMINIUM APT INC

Mailing Address

2837 PIERCE STREET HOLLYWOOD FL 33020

Principal Place of Business

2598 LAKEVIEW CT.

COOPER CITY FL 33026-3650

FILED Mar 01, 2000 8:00 am Secretary of State

03-01-2000 90072 010 ****61.25



I Place of Business		-	
#, etc.	Suite, Apt. #, etc.	····	DO NOT WRITE IN THIS SPACE
e	City & State		4. FEI Number NOT APPLICABLE Applied For Not Applied
Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Currer	nt Registered Agent		7. Name and Address of New Registered Agent
		Name	
LEESON, PAMELA A 2598 LAKEVIEW COURT COOPER CITY FL 33026		Street Ado	lress (P.O. Box Number is Not Acceptable)
		City	FL Zip Code
Signature, typed or printed name of registered age	ent and title if applicable (NC	OTE: Registered Agent signature	required when reinstating) DATE
FILE NOW: FEE IS \$61.25	Trust Fund Contr	ibution.	\$5.00 May Be Make Check Payable to Department of State
T (\$\$ # # DO T \$ \$ COPEICERS AND I			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
D UNSWORTH, JEAN	☐ Delete	mu S/T	Camela A. Leeson Jaddi 2598 Lakeview Gourt
HOLLYWOOD FL 33020		CITY-ST-ZIP	Cooper City Floride 33026
D MCGAHEY ROBERT	☐ Delete	TITLE (A)	Director Change Add
2837 PIERCE ST #16		STREET ADDRESS 2	1837 Pierce St #7
		T	tollywood, Florida 33020
1 10	☐ Delete	NAME (Director □ Change ☑ Addi
2837 PIERCE STR #11		STREET ADDRESS	1837 Pierce 1St. #5
			Hollywood Florida 33020
PD	☐ Delete	TITLE (D)	Narge RottLoff #18 □ Change V Addi
	•	NAME OTREET ADDRESS	600
1		STREET ADDRESS	tollywood Fl 33020
D	□ Delete	TITLE	☐ Change ☐ Addi
1 -		NAME	
		STREET ADDRESS	
HOLLYWOOD FL		CITY-ST-ZIP	
D	Dolete	TITLE	Change Add
MCKINNEY, ROSE		NAME	
2837 PIERCE STREET, #9		STREET ADDRESS	
		CITY-ST-ZIP	
	ith this filing does not qualify t	for the exemption states	Lin Section 119 07(3)(i) Florida Statutes I further certify that the information
	Country 6. Name and Address of Current PAMELA A EVIEW COURT CITY FL 33026 Inamed entity submits this statement Signature typed or printed name of registered age FILE NOW: FEE IS \$61.25 DUNSWORTH, JEAN 2837 PIERCE ST #11 HOLLYWOOD FL 33020 DMCGAHEY, ROBERT 2837 PIERCE ST #16 HOLLYWOOD FL 33020 VD UNSWORTH, DONALD 2837 PIERCE STR #11 HOLLYWOOD FL DD TYMON, JOHN J 2837 PIERCE STREET HOLLYWOOD FL D SHANDER, PAULINE 2837 PIERCE STREET HOLLYWOOD FL D SHANDER, PAULINE 2837 PIERCE STREET HOLLYWOOD FL D MCKINNEY, ROSE	#, etc. Suite, Apt. #, etc. e City & State Country Zip 6. Name and Address of Current Registered Agent PAMELA A EVIEW COURT CITY FL 33026 named entity submits this statement for the purpose of changing in the statement for the purpose of ch	#, etc. Suite, Apt. #, etc. City & State Country Zip Country 6. Name and Addreas of Current Registered Agent Name PAMELA A EVIEW COURT CITY FL 33026 City Inamed entity submits this statement for the purpose of changing its registered office or resistered entity submits this statement for the purpose of changing its registered office or resistered entity submits this statement for the purpose of changing its registered office or resistered entity submits this statement for the purpose of changing its registered office or resistered entity submits this statement for the purpose of changing its registered office or resistered entity submits this statement for the purpose of changing its registered office or resistered entity submits this statement for the purpose of changing its registered office or resistered entity submits this statement for the purpose of changing its registered office or resistered entity submits this statement for the purpose of changing its registered office or resistered entity submits and

indicated on this report or supplemental report is true and accurate and that my 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 on trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an saddress, with all other like empowered.

SIGNATURE:

Daytime Phone #