2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2001 8:00 am
Secretary of State
04-19-2001 90062 012 ****61.25

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DOCUMENT # 736244

1. Entity Name

KINGSWAY COUNTRY CLUB, INCORPORATED

Principal Place of Business	Mailing Address
13625 SW KINGSWAY CIR LAKE SUZY FL 33821 US	13625 SW KINGSWAY CIR LAKE SUZY FL 33821 US

C0049189

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1679966 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CARR, DAROL 115 WEST OLYMPIA AVE P.O. DRAWER 511447 PUNTA GORDA FL 33951	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BLANCHARD, TED IV PO BOX 380939 MURDOCK FL 33938-0939	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LAMB, BRUCE - TREASURER 12370 SW Suzy Ave. Lake Suzy, FL 34226 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HADDEN, JAMES 12991 SW KINGSWAY CIRCLE ARCADIA FL 34266	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	HADDEN, JAMES - VP 12991 SW KINGSWAY CIRCLE ARCADIA, FL 34266 — ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D POVINELLI, HENRY 12621 SW KINGSWAY CIR LAKE SUZY FL 34266	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	POVINELLI, HENRY -PRESIDENT 12621 SW KINGSWAY CIR. LAKE SUZY, FL 34266 — ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP TRONCIN, JIM 12856 SW PEMBROKE CIR LAKE SUZY FL 34266	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ENGLUND, JOHN -DIRECTOR 26092 DUNEDIN CT. PUNTA GORDA, FL 33983 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BRUMFIELD, ROY 11933 SW KINGSWAY CIR LAKE SUZY FL 34266	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MCALPINE, GLEN - DIRECTOR 13043 KINGSWAY CIRCLE LAKE SUZY, FL 34266 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S AIKEN, NEAL 12903 SW KINGSWAY CIRCLE ARCADIA FL 34266	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 or 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 address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4-6-2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #