

20Q1 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90192 019 ***150.00

0001907

DOCUMENT # J42769

1. Entity Name
KINGSLEY RESTAURANT CORPORATION

Principal Place of Business Mailing Address
1994-B KINGSLEY AVE. 1994-B KINGSLEY AVE.
ORANGE PARK FL 32073 ORANGE PARK FL 32073

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



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-2744728** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

AKEL, EDWARD C
2301 INDEPENDENT SQUARE
ONE INDEPENDENT DRIVE
JACKSONVILLE FL 32202

7. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	JAGHAB, GEORGE H	
STREET ADDRESS	1994-B KINGSLEY AVE.	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	VP	☐ Delete
NAME	JAGHAB, NANCY A	
STREET ADDRESS	1994-B KINGSLEY AVE.	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	VP	☐ Delete
NAME	JAGHAB, RYAN T	
STREET ADDRESS	1994-B KINGSLEY AVE.	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	VP	☐ Delete
NAME	JAGHAB, MARYANN N	
STREET ADDRESS	1994-B KINGSLEY AVE.	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	VP	☐ Delete
NAME	JAGHAB, LINDSAY M	
STREET ADDRESS	1994-B KINGSLEY AVE.	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *George Jaghab* / *George Jaghab*

CR2E034 (10/00)