

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90127 039 ***150.00

DOCUMENT # 192881

1. Entity Name

KANE FURNITURE CORPORATION

Principal Place of Business

~~1111 NORTHERN~~

5700 70TH AVE. NO

PINELLAS PARK FL 34665-4238

Mailing Address

~~1111 NORTHERN~~

5700 70TH AVE. NO

PINELLAS PARK FL 34665-4238

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 **59-0791370**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NOVACK, IRWIN M

5700 70TH AVE N

PINELLAS PARK FL 33781

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

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HUMBOLDT, JAMES 5700 70TH AVE N PINELLAS PARK FL 33781	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LANE, CAROL 5700 70TH AVE N PINELLAS PARK FL 33781	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NOVACK, IRWIN M 5700 70TH AVE NORTH PINELLAS PARK FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD ROTHMAN, THELMA P 5700 70TH AVE NORTH PINELLAS PARK FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TURVILLE, EDWARD A 501 FIRST AVE NORTH #801 ST PETERSBURG FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	HUMBOLDT, JAMES	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ENGLE, MURRAY 5700 70TH AVE NO. PINELLAS PARK, FL 33781	☐ Change ☒ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/3/02 **727-545-9555**

CR2E034 (9/01)