

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708072

1. Entity Name

KINGSTON CLUB, INCORPORATED

Principal Place of Business

%NEWELL PROP MGMT
4148A CORPORATE SQ
NAPLES FL 34104
US

Mailing Address

4148A CORPORATE SQ
NAPLES FL 34104-4753
US

2. Principal Place of Business

c/o Integrated Property Management

Suite, Apt. #, etc.
3435 10th Street N., Suite 201

City & State
Naples, Florida

Zip 34103

Country USA

3. Mailing Address

c/o Integrated Property Management

Suite, Apt. #, etc.
3435 10th Street N., Suite 201

City & State
Naples, Florida

Zip 34103

Country USA

4. FEI Number

59-1210544

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEWELL, WILLIAM
4148A CORPORATE SQ
NAPLES FL 34104

7. Name and Address of New Registered Agent

Name integrated Property Management, Inc.

Street Address (P.O. Box Number is Not Acceptable)

3435 10th Street North

Suite 201

City

Naples

FL

Zip Code

34103

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.

4148A CORPORATE SQ
NAPLES FL 34104

SIGNATURE *Frank Kropik*

FRANK KROPIK (on behalf of Integrated Prop Mgmt)

4/25/00

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

TITLE D
NAME ROSENTHAL, JANICE
STREET ADDRESS 1820 GULF SHORE BLVD N #N
CITY-ST-ZIP NAPLES FL 34102 ☐ Delete

TITLE PD
NAME BROWN, DONALD
STREET ADDRESS 5580 SW 7TH STREET
CITY-ST-ZIP PLANTATION FL 33317 ☐ Delete

TITLE SD
NAME MASON, DEBORAH
STREET ADDRESS 1820 GULF SHORE BLVD N #C
CITY-ST-ZIP NAPLES FL 34102 ☐ Delete

TITLE VD
NAME PARKER, MERLE
STREET ADDRESS 1820 GULF SHORE BLVD N #E
CITY-ST-ZIP NAPLES FL 34102 ☐ Delete

TITLE TD
NAME WILSON, GLEN
STREET ADDRESS 1820 GULF SHORE BLVD N #H
CITY-ST-ZIP NAPLES FL 34102 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE V/D
NAME Rosenthal, Janice
STREET ADDRESS 1820 Gulf Shore Blvd. N., #B
CITY-ST-ZIP Naples, FL 34102 ☒ Change ☐ Addition

TITLE S/D
NAME Brown, Donald
STREET ADDRESS 1820 Gulf Shore Blvd. N., #N
CITY-ST-ZIP Naples, FL 34102 ☒ Change ☐ Addition

TITLE P/D
NAME Mason, Deborah
STREET ADDRESS 1820 Gulf Shore Blvd. N., #C
CITY-ST-ZIP Naples, FL 34102 ☒ 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 ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MERLE
PARKER

3/5/00

941-434-7447

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90035 022 ****61.25

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DO NOT WRITE IN THIS SPACE