

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 747155

1. Entity Name

KINGS COURT HOMEOWNERS ASSOCIATION, INC.

FILED

Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90020 045 ****61.25

Principal Place of Business

Mailing Address

8600 SW 113 PLACE
MIAMI FL 33173

8600 SW 113 PLACE
MIAMI FL 33173-4200

80000330



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1974380

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MARC A KUPERMAN
1320 S DIXIE HWY SUITE 1180
CORAL GABLES FL 33146

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
TD
MACON, THOMAS
11465 SW 87 TERR
MIAMI FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
SAMUEL STEEN
11392 S.W. 86 LANE
MIAMI FL 33173 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
REKER, BARBARA
11357 SW 86TH LANE
MIAMI, FL 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
THOMAS LANAHAN
8653 S.W. 113 COURT
MIAMI FL 33173 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
MILKS, WARREN
11537 SW 84TH LANE
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
ROBERT REGAN
11425 S.W. 87 TERR.
MIAMI FL 33173 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WATERS, WILLIAM
8455 SW 113 COURT
MIAMI FL ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LANDERS, BERNARD
11326 SW 85 LANE
MIAMI FL ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
STEARNS, MARY
11418 S.W. 86 LANE
MIAMI FL ☐ Delete

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: *Barbara Reker* BARBARA REKER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-00 (305) 274-8608

Date

Daytime Phone #

CR: 037 (9/99)