2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2000 8:00 am
Secretary of State
04-10-2000 90014 031 ****70.00

DOCUMENT # 749058

1. Entity Name

KITCHING COVE ESTATES HOMEOWNERS ASSOCIATION, IN

Principal Place of Business	Mailing Address
1016 SE KITCHING COVE PORT ST LUCIE FL 34952 US	1016 KITCHING COVE PORT ST LUCIE FL 34952-5902

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 59-2404423 ☐ 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
KING, JOLEEN 1016 KITCHING COVE PORT ST LUCIE FL 34952	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: Joleen G King — Jan 15 2000

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	P DILLON, JIM 1005 SE KITCHING COVE PORT ST. LUCIE FL 34952	☐ Delete	T CRAIG STRANIGAN 1002 SE KITCHING COVE Port St Lucie FL 34952-5902	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KULENSKI, ED 1004 SE KITCHING COVE PSL FL 34952	☐ Delete	VP Bob Larson 1014 SE Kitching Cove Port St Lucie FL 34952-5902	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ~~DILLON, GAYLE~~ ~~1005 SE KITCHING COVE~~ ~~PORT ST LUCIE FL 34952-5902~~	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KING, JOLEEN 1016 KITCHING COVE PORT ST. LUCIE FL	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ~~BOEHLE, BEA~~ ~~1012 SE KITCHING COVE~~ ~~PORT ST LUCIE FL 34952-5902~~	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WESTMORELAND, MAX 1001 SE KITCHING COVE PORT ST. LUCIE FL 34952	☐ Delete		☐ Change ☐ Addition

CR2E037 (9/99)

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: Joleen G King — 1/15/00 — 561 337-1738

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #