

# 2001 UNIFORM BUSINESS REPORT (UBR)

0001460 AF

DOCUMENT # A15776

1. Entity Name

KYNG'S HEATH V., LTD.

Principal Place of Business

284 PARK AVE., N.  
WINTER PARK FL

Mailing Address

284 PARK AVE., N.  
WINTER PARK FL

2. Principal Place of Business

284 Park Avenue North

Suite, Apt. #, etc.

Suite A

City & State

Winter Park, FL

Zip  
32789

Country

3. Mailing Address

284 Park Avenue North

Suite, Apt. #, etc.

Suite A

City & State

Winter Park, FL

Zip  
32789

Country

6. Name and Address of Current Registered Agent

~~KINGLAND, ROBERT S~~  
~~284 PARK AVE. NORTH~~  
~~WINTER PARK FL 32789~~

7. Name and Address of New Registered Agent

Name ROBERT L. UNDERWOOD  
Street Address (P.O. Box Number is Not Acceptable)

537 EAST PARK AVENUE

City TALLAHASSEE FL Zip Code 32301

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 Robert L. Underwood DATE 4/19/2001  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions  
as Shown on record.

\$1,000,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #  
NAME KINGSLAND, ROBERT S  
STREET ADDRESS 284 PARK AVE., NORTH  
CITY-ST-ZIP WINTER PARK FL

DOCUMENT #  
NAME PREWITT, DON  
STREET ADDRESS 284 PARK AVE., NORTH  
CITY-ST-ZIP WINTER PARK FL

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Robert L. Underwood  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE 4/19/2001 DAYTIME PHONE #

FILED

01 JUN -4 PM 12:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E003 (11/00)