2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000002163								
KING DEVELOPMENT, LLC				•	FILED			
Principal Place of Business Mailing Address '					OI JAN 24 AM II: 08			
2125 WINDWARD WAY VERO BEACH FL 32963		2125 WINDWARD WAY VERO BEACH FL 32963			SEGRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business 3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEIN	4. FEI Number . Applied For Not Applicable			
Zip ,	Country	Zip	ip Country		licate of Status Desired	\$5.00 Add	litional	
. ــ ـــ ـــــــــــــــــــــــــــــ	6. Name and Address of Current	Registered Agent	- 	7. Name	and Address of New Rec			
			Name					
TAYLOR, JAMES A III			Street A	ddress (P.O. Box N	ress (P.O. Box Number is Not Acceptable)			
	HIGHWAY A-1-A, SUITE 200 ACH FL 32963							
TENO DENOTTE SEGO			City FL Zip Code			a		
8. The above	named entity submits this statement for	or the purpose of changing its re	egistered office or	registered agent,	or both, in the State of Florid	da.		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
		FILE NO	W!!! FEE IS \$	\$50.00		, <u>, , , , , , , , , , , , , , , , , , </u>		
Make Check Payable to Department					,			
9.	MANAGING MEMB	ERS/MEMBERS	10.		ADDITIONS/C			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KING CHARTER CO. 2125 WINDWARD WAY	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	King Chai	antes I. Babias ter Os. Jusand Way Jush, FL 32963	Chairman	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VERO BEACH FL 32963	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		100003 -01/26 ******	Change 575751	☐ Addition ☐ — — — — — — — — — — — — — — — — — —	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		*****	50,00 □米脂肪产剂	50 Addiba	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
indicated	certify that the information supplied with on this report is true and accurate and bility company or the receiver or truste	l that my signature shall have the	e same legal effe	ct as if made under	oath; that I am a managing	orther certify that the ing g member or manager	formation of the	