2002 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 06, 2002 8:00 am Secretary of State DOCUMENT # N01000001139 1. Entity Name KINGSTON ACADEMY, INC. 03-06-2002 90119 043 ****61.25 Mailing Address Principal Place of Business 15701 SW 51ST MANOR 15701 SW 51ST MANOR FORT LAUDERDALE FL 33331 FORT LAUDERDALE FL 33331 2. Principal Place of Business 3. Mailing Address 4700 SW 1884 Avenue Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 65-1078929 Not Applicable \$8.75-Additional-5. Certificate of Status Desired 33332 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **GREEN. STEPHANIE** 15701 SW 51ST MANOR FORT LAUDERDALE FL 33331 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 registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Department of State Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Director **Addition** TITLE D □ Delete TITLE Elizabeth Contri NAME GREEN, STEPHANIE NAME 888 Spoonbill Circle STREET ADDRESS STREET ADDRESS 15701 SW 51ST MANOR Weston, FL 33326 CITY-ST-7IP CITY-ST-ZIP FORT LAUDERDALE FL 33331 Addition ☐ Change **▼** Delete TITLE TITLE NAME NAME HUTCHINSON, NICOLLE STREET ADDRESS STREET ADDRESS 7651 JOHNSON STREET CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33024 ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME MONTGOMERY, MICHAEL STREET ADDRESS STREET ADDRESS 14201 NW 60TH AVENUE CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL 33014 ☐ Change Addition TIT) F ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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

phanic K. Green 2/17/02 954-252-536 SIGNATURE:

ike empowered.

changed, or on an attachment with an address, with

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 empoweled to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if