


2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

9/5/2003-90110-013-\$61.25-\$61.25

0010823

DOCUMENT # N02000002930 1. Entity Name KINGS COURT COMMUNITY DEVELOPMENT CORPORATION						03 SEP 18 AM 11:25 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 2001 PALM BEACH LAKES BLVD. SUITE 204 WEST PALM BEACH FL 33409				Mailing Address 2001 PALM BEACH LAKES BLVD. SUITE 204 WEST PALM BEACH FL 33409			
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 59-2690393				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
ROSE, ANGELA V 2001 PALM BEACH LAKES BLVD. SUITE 204 WEST PALM BEACH FL 33409				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>			
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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE <u>Angela V. Rose</u> <u>Angela V. Rose - Executive Director</u> <u>9/2/03</u> <u>561-697-2600</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)</small>							
FILE NOW: FEE IS \$61.25 After September 10, 2003, min. will be \$236.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSE, ANGELA V 2001 PALM BEACH LAKES BLVD. SUITE 204 WEST PALM BEACH FL 33409	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Deputy Director Clifton Wilson 2001 Palm Beach Lakes Blvd. Suite 204 West Palm Beach, FL 33409	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEVER, LISA 2001 PALM BEACH LAKES BLVD. SUITE 204 WEST PALM BEACH FL 33409	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STIEBEL-CHIN, GRETA 2001 PALM BEACH LAKES BLVD. SUITE 204 WEST PALM BEACH FL 33409	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN, PAULETTE B 2001 PALM BEACH LAKES BLVD. SUITE 204 WEST PALM BEACH FL 33409	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, VIRGINIA 2001 PALM BEACH LAKES BLVD. SUITE 204 WEST PALM BEACH FL 33409	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 of 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: <u>Angela V. Rose</u> <u>Angela V. Rose - Executive Director</u> <u>9/2/03</u> <u>561-697-2600</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>							

CR2E037 (4/03)

9/2/18