

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2000 8:00 am
Secretary of State

02-20-2000 90014 014 ****61.25

DOCUMENT # N96000001172

1. Entity Name

KING'S BAY SUBDIVISION HOMEOWNERS' ASSOCIATION,

Principal Place of Business

Mailing Address

6540 SW 147TH ST
 MIAMI FL 33158
 US

6540 SW 147TH ST
 MIAMI FL 33158-1042
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0739189

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SAMWAY, J. MICHAEL
6540 SW 147TH ST
MIAMI FL 33158

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

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

- TITLE Delete
D
 NAME **BORBOLLA, IGNACIO**
 STREET ADDRESS **6210 SW 145TH ST**
 CITY-ST-ZIP **MIAMI FL 33158**
- TITLE Delete
D
 NAME **OLSEN, KATHLEEN**
 STREET ADDRESS **6215 SW 145TH ST**
 CITY-ST-ZIP **MIAMI FL 33158**
- TITLE Delete
D
 NAME **SAMWAY, MICHAEL**
 STREET ADDRESS **6540 SW 147 ST**
 CITY-ST-ZIP **MIAMI FL 33158**
- TITLE Delete
D
 NAME **MARANTO, MILES**
 STREET ADDRESS **6230 SW 147 TERR**
 CITY-ST-ZIP **MIAMI FL 33158**
- TITLE Delete
D
 NAME **PERRY, JIM**
 STREET ADDRESS **6345 SW 149TH ST 14520 SW 64 Ct.**
 CITY-ST-ZIP **MIAMI FL 33158**
- TITLE Delete
D
 NAME **STEVENS, TOM**
 STREET ADDRESS **6380 SW 145 ST.**
 CITY-ST-ZIP **MIAMI FL 33158**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

- TITLE Change Addition
 NAME **D Yenzet, Alan**
 STREET ADDRESS **6380 SW 147 Ter.**
 CITY-ST-ZIP **miami, FL 33158**
- TITLE Change Addition
 NAME **Rubin, alan**
 STREET ADDRESS **6225 SW 145 St.**
 CITY-ST-ZIP **miami, FL 33158**
- TITLE Change Addition
 NAME **martin, Pura**
 STREET ADDRESS **14610 SW 65 Av.**
 CITY-ST-ZIP **miami, FL 33158**
- TITLE Change Addition
- TITLE Change Addition
- TITLE Change 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 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: *Michael Samway* **MICHAEL SAMWAY**

1/30/00

305/575-6290

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CF12E037 (9/99)