

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000007654

1. Entity Name

HENRIETTA KING CHARITABLE FOUNDATION, INC.

Principal Place of Business

Mailing Address

% KRUSCH & MODELL
10 ROCKEFELLER PLAZA, 12TH FLOOR
NEW YORK NY 10020

% KRUSCH & MODELL
10 ROCKEFELLER PLAZA, 12TH FLOOR
NEW YORK NY 10020

2. Principal Place of Business

c/o Don King Productions, Inc.

3. Mailing Address

Same as #2

Suite, Apt. #, etc.

Suite, Apt. #, etc.

501 Fairway Drive

City & State

City & State

Deerfield Beach, FL

Zip

Country

Zip

Country

33441

Palm Beach

4. FEI Number

31-1703466

Applied For

New Applicant

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

PARALEGAL & ATTORNEY SERVICE BUREAU, INC.
1406 HAYS STREET, STE. 2
TALLAHASSEE FL 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when releasing)

DATE

FILE NOW:
FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fee

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE President / Director
NAME Henrietta King
STREET ADDRESS c/o Don King Productions, Inc.
CITY-ST-ZIP 501 Fairway Drive
Deerfield Beach, FL 33441

TITLE Vice President / Secretary
NAME Don King
STREET ADDRESS c/o Don King Productions, Inc.
CITY-ST-ZIP 501 Fairway Drive
Deerfield Beach, FL 33441

TITLE Director
NAME Carl King
STREET ADDRESS c/o Don King Productions, Inc.
CITY-ST-ZIP 501 Fairway Drive
Deerfield Beach, FL 33441

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 119 (7)(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 IRLU empowered.

SIGNATURE:

Henrietta King

4/30/01

Signature and typed or printed name of registered officer or director

Date

Signature Printed

FILED

01 MAY -1 PM 4: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CREATED BY: 100004218831-7

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