

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000053196

1. Entity Name.

KINGSTON PRODUCTIONS, INC.

FILED
Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90107 048 ***150.00

Principal Place of Business

110 ROSE BRIAR DR.
LONGWOOD FL 32750

Mailing Address

110 ROSE BRIAR DR.
LONGWOOD FL 32750

2. Principal Place of Business

1920 N. INDIAN HILL BLVD

3. Mailing Address

Suite, Apt. #, etc.

City & State

CHAREMONT, CA

City & State

Zip

9665

Country

USA

Country

4. FEI Number

59-3649325

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUNN, LARRY B
110 ROSE BRIAR DR.
LONGWOOD FL 32750

7. Name and Address of New Registered Agent

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME DUNN, LARRY B
STREET ADDRESS 110 ROSE BRIAR DR.
CITY-ST-ZIP LONGWOOD FL 32750

TITLE D ☐ Delete
NAME KINGSTON, JAMES
STREET ADDRESS 110 ROSE BRIAR DR.
CITY-ST-ZIP LONGWOOD FL 32750

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DIRECTOR, PRESIDENT ☒ Change ☐ Addition
NAME KINGSTON, JAMES
STREET ADDRESS 1920 N. INDIAN HILL BLVD
CITY-ST-ZIP CHAREMONT, CA 91211

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James P Kingston
JAMES P KINGSTON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 10 2001 909-399-9665
Date Daytime Phone #

CR2E034 (10/00)