## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Apr 30, 2004 8:00 am Secretary of State DOCUMENT # P01000072579 1. Entity Name 04-30-2004 90313 022 \*\*\*150.00 KIMCO LAKELAND 123, INC. Principal Place of Business Mailing Address 3333 NEW HYDE PARK RD., STE. 100 3333 NEW HYDE PARK RD., STE. 100 NEW HYDE PARK NY 11042 NEW HYDE PARK NY 11042 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-3735431 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 City 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. I am familiar with, and accept the obligations of registered agent 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 \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Delete ☐ Addition COOPER, MILTON NAME NAME STREET ADDRESS 3333 NEW HYDE PARK RD., STE, 100 STREET ADDRESS NEW HYDE PARK NY 11042 CITY-ST-ZIP TITLE Defete TITLE Change ☐ Addition michael schimler KIMMEL, MARTIN S NAME NAME STREET ADDRESS 3333 NEW HYDE PARK RD., STE. 100 STREET ADDRESS CITY-ST-ZIP **NEW HYDE PARK NY 11042** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition NAME FLYNN, MICHAEL J STREET ADDRESS 3333 NEW HYDE PARK RD., STE. 100 STREET ADDRESS CITY-ST-78P NEW HYDE PARK NY 11042 CITY-ST-ZIP TIT) F Delete Change ☐ Addition JOEL, YA/MAK I NAME NAME 3333 NEW HYDE PARK RD #100 STREET ADDRESS STREET ADDRESS NEW HYDE PARK NY 11042 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition PAPPAGALLO, MIKE NAME NAME 3333 NEW HYDE PARK RD #100 STREET ADDRESS STREET ADDRESS NEW HYDE PARK NY 11042 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition

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 10 or Block 11 if changed, or on an attachment with an address with all other like e powered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

KAUDERER, BRUCE

3333 NEW HYDE PARK RD#100

NEW HYDE PARK NY 11042

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**