

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90156 020 ***158.75

DOCUMENT # P95000047437

1. Entity Name

KNIGHTSBRIDGE PARK INTERNATIONAL INC

Principal Place of Business

Mailing Address

7860 W IRLO BRONSON HWY
 FL 34747

7860 W IRLO BRONSON HWY
 KISSIMMEE FL 34747-1738
 US

2. Principal Place of Business

3. Mailing Address

7864 W. IRLO BRONSON HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KISSIMMEE FLORIDA

City & State

KISSIMMEE, FLORIDA

Zip
34747

Country
USA

Zip
34747

Country
USA

4. FEI Number

65-0627483

Applied For

Not Applicable

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

WILKES, BRIAN
7860 W IRLO BRONSON HWY
KISSIMMEE FL 34747

Name

WILKES, BRIAN

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

7864 W. IRLO BRONSON HWY

City

KISSIMMEE

FL

Zip Code

34747

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **WILKES, BRIAN JOHN**
 STREET ADDRESS **7860 W IRLO BRONSON HWY**
 CITY-ST-ZIP **KISSIMMEE FL 34747**

TITLE **PD** ☒ Change ☐ Addition
 NAME **WILKES, BRIAN JOHN**
 STREET ADDRESS **7864 W. IRLO BRONSON HWY**
 CITY-ST-ZIP **KISSIMMEE, FLORIDA, 34747**

TITLE **VD** ☐ Delete
 NAME **WILKES, JANET ANNE**
 STREET ADDRESS **7860 W IRLO BRONSON HWY**
 CITY-ST-ZIP **KISSIMMEE FL 34747**

TITLE **VD** ☒ Change ☐ Addition
 NAME **WILKES, JANET ANNE**
 STREET ADDRESS **7864 W. IRLO BRONSON HWY**
 CITY-ST-ZIP **KISSIMMEE, FLORIDA, 34747**

TITLE **VD** ☐ Delete
 NAME **WILKES, JAMES BRIAN**
 STREET ADDRESS **7860 W IRLO BRONSON HWY**
 CITY-ST-ZIP **KISSIMMEE FL 34747**

TITLE **VD** ☒ Change ☐ Addition
 NAME **WILKES, JAMES BRIAN**
 STREET ADDRESS **7864 W. IRLO BRONSON HWY**
 CITY-ST-ZIP **KISSIMMEE, FLORIDA, 34747**

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRIAN WILKES

4/29/00

Date

407-397-0440

Daytime Phone #