

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90023 022 ***150.00

DOCUMENT # P96000008649

1. Corporation Name

KP PROPERTY MANAGEMENT CORPORATION

Principal Place of Business

4000 NW 36 AVE
MIAMI FL 33142

Mailing Address

11900 BISCAYNE BLVD
STE 200
MIAMI FL 33181-2726

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/26/1996

4. FEI Number

65-0643434

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 206 Danbury Rd

2a. Mailing Address

26 206 Danbury Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Wilton, CT.

City & State

28 Wilton, CT.

Zip

24 06897

Country

25 Fairfield

Zip

29 06897

Country

30 Fairfield

9. Name and Address of Current Registered Agent

SMITH, LINDA M
11900 BISCAYNE BLVD.
SUITE 200
MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE AS ☒ DELETE
NAME SMITH, LINDA M
STREET ADDRESS 11900 BISCAYNE BLVD., SUITE 200
CITY-ST-ZIP MIAMI FL 33181

TITLE PD ☒ DELETE
NAME KOCH, ROGER L
STREET ADDRESS 4000 NW 36 AVE
CITY-ST-ZIP MIAMI FL 33142

TITLE VSD ☒ DELETE
NAME TRIPODO, ANTHONY
STREET ADDRESS 4000 NW 36 AVE
CITY-ST-ZIP MIAMI FL 33142

TITLE D ☒ DELETE
NAME SALTER, STEVEN
STREET ADDRESS 4000 NW 36 AVE
CITY-ST-ZIP MIAMI FL 33142

TITLE D ☒ DELETE
NAME MOUSSA, GEORGE
STREET ADDRESS 4000 NW 36 AVE
CITY-ST-ZIP MIAMI FL 33142

TITLE D ☒ DELETE
NAME SKINNER, RAY
STREET ADDRESS 4000 NW 36 AVE
CITY-ST-ZIP MIAMI FL 33142

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director ☒ Change ☐ Addition
1.2 NAME Scott C. Dunn
1.3 STREET ADDRESS 206 Danbury Road
1.4 CITY-ST-ZIP Wilton, CT. 06897

2.1 TITLE Vice President ☒ Change ☐ Addition
2.2 NAME Kenneth S. Greenberg
2.3 STREET ADDRESS 1266 E. Main St.
2.4 CITY-ST-ZIP Stamford, CT. 06902

3.1 TITLE Asst Secretary ☒ Change ☐ Addition
3.2 NAME Alexandra Hanak
3.3 STREET ADDRESS 206 Danbury Road
3.4 CITY-ST-ZIP Wilton, CT 06897

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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

4/29/99 203-834-6363

Date

Daytime Phone #

CR2E034 (11/98)

0261428