

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90060 043 ***150.00

DOCUMENT # P 96000008649

1. Entity Name

K P Property Management Corporation

Principal Place of Business

Mailing Address

D0056359

2. Principal Place of Business

3. Mailing Address

50 Washington Street

50 Washington Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 1211

Suite 1211

City & State

City & State

South Norwalk, Ct

South Norwalk, Ct

Zip

Country

Zip

Country

06854

USA

06854

USA

4. FEI Number

65-0643434

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT Corporation System
 1200 South Pine Island Road
 Plantation Florida 33324

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DT
 NAME Scott C. Dunn
 STREET ADDRESS 50 Washington St., Suite 1211
 CITY-ST-ZIP South Norwalk, Ct 06854 ☐ Delete

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

TITLE VP
 NAME Kenneth S. Greenberg
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS 50 Washington St., Suite 1211
 CITY-ST-ZIP South Norwalk, Ct 06854 ☒ Change ☐ Addition

TITLE AS
 NAME Alesandra Hanak
 STREET ADDRESS 50 Washington St., Suite 1211
 CITY-ST-ZIP South Norwalk, Ct 06854 ☐ Delete

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

TITLE S
 NAME Oali masud
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS 50 Washington St., Suite 1211
 CITY-ST-ZIP South Norwalk, Ct 06854 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

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

Date

Daytime Phone #

5/3/01 203-359-0722