

2001' UNIFORM BUSINESS REPORT (UBR)**FILED**
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90020 044 ***150.00

0560812

DOCUMENT # P990000920511. Entity Name
KENZI CORPORATION

Principal Place of Business

**719 GOOD HOMES RD.
ORLANDO FL 32818**

Mailing Address

**4426 BEGONIA COURT
WINDERMERE FL 34786**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3602469**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**J. BRIAN BAIRD
174 WEST COMSTOCK AVENUE
SUITE 215
WINTER PARK FL 32789**

7. Name and Address of New Registered Agent

Name **TERRENCE L. BARRETT**

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

4426 Begonia CTCity **Windermere**

FL

Zip Code **34786**

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 *Terrence L. Barrett President*

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

(NOTE: Registered Agent signature required when reinstating)

4/30/01

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 **BARRETT, TERRENCE L**
STREET ADDRESS **4426 BEGONIA COURT**
CITY-ST-ZIP **WINDERMERE FL 34786**TITLE **D** ☐ Delete
NAME **SHEELE, LINDA H**
STREET ADDRESS **1403 OAK TREE COURT**
CITY-ST-ZIP **APOPKA FL 32712**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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:

Terrence L. Barrett **TERRENCE L. BARRETT**

Date

4/30/01

Daytime Phone #

4076549617

CR2E034 (10/00)