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FILED
Mar 12 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731956 (9)
1. Corporation Name
KINGS COURT II PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business
2022 NW 89 AVE
PEMBROKE PINES FL 33024
US

Mailing Address
2022 NW 89 AVE
PEMBROKE PINES FL 33024
US

3. Date Incorporated or Qualified

02/20/1975

4. FEI Number

59-2115465

Applied For

Not Applicable

2. Principal Place of Business

21 2014 NW 89 Ave

Suite, Apt. #, etc.

22

City & State

23 Pembroke Pines FL

Zip

24 33024

Country

25 USA

2a. Mailing Address

26 2014 NW 89 Ave

Suite, Apt. #, etc.

27

City & State

28 Pembroke Pines FL

Zip

29 33024

Country

30 USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POLIAKOFF, GARY A
3111 STIRLING RD.
FT. LAUDERDALE FL 33312

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Santo Albanese

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

(NOTE: Registered Agent signature required when reinstating)

3/2/98

DATE

12. OFFICERS AND DIRECTORS

TITLE PDD ☒ DELETE

NAME FLANDERKA, CHRISTINE

STREET ADDRESS 2022 NW 890 AVE

CITY-ST-ZIP PEMBROKE PINES FL

TITLE VPD ☐ DELETE

NAME ALBANESE, SANTO

STREET ADDRESS 2014 NW 89 AVE

CITY-ST-ZIP PEMBROKE PINES FL

TITLE TDD ☐ DELETE

NAME ACEVEDO, WILFREDO

STREET ADDRESS 2024 NW 89TH AVE

CITY-ST-ZIP PEMBROKE PINES FL 33024

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☒ Addition

☒ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Santo Albanese

3/2/98

CR2E037 (10/97)