

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 16, 2005 08:00 AM
Secretary of State

DOCUMENT # 731956

1. Entity Name
**KINGS COURT II PROPERTY OWNERS ASSOCIATION,
INC.**



Principal Place of Business
**2000 NW 89 AVE
PEMBROKE PINES, FL 33024 US**

Mailing Address
**KINGS COURT II; PROPERTY OWNERS ASSOC
PO BOX 848612
HOLLYWOOD, FL 33084 US**



07312005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2115465

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**POLIAKOFF, GARY A
C/O BECKER & POLIAKOFF, P.A.
3111 STIRLING RD.
FT. LAUDERDALE, FL 33312**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	FRANCOIS, JEFF
STREET ADDRESS	2000 NW 89 AVE
CITY-ST-ZIP	PEMBROKE PINES, FL 33024
TITLE	TD
NAME	MONDEJAR, MARIA
STREET ADDRESS	2002 NW 89 AVE
CITY-ST-ZIP	PEMBROKE PINES, FL 33024
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000378310
09/16/05-80003-002 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Jeff A. Francois