

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 394619

FILED
Apr 29, 2009
Secretary of State

Entity Name: KING'S GATE CAMPER'S HOLIDAY, INC.

Current Principal Place of Business:

3270 LAKE POINTE BLVD. APT. 233
SARASOTA, FL 342312611 US

New Principal Place of Business:

Current Mailing Address:

3270 LAKE POINTE BLVD. APT. 233
SARASOTA, FL 342312611 US

New Mailing Address:

FEI Number: 59-1371886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOREY, LYNN A JR
3270 LAKE POINTE BLVD
#233
SARASOTA, FL 342312611 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOREY, LYNN A., JR.
Address: 3270 LAKE POINTE BLVD. APT. 233
City-St-Zip: SARASOTA, FL 342312611

Title: S () Delete
Name: MOREY, MARGUERITE F.
Address: 700 JOHN RINGING BLVD T-1103
City-St-Zip: SARASOTA, FL 34236

Title: T () Delete
Name: MOREY, LYNN A., III
Address: 3908 EASTON TERRACE
City-St-Zip: SARASOTA, FL 34238

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOREY, LYNN A JR
Address: 3270 LAKE POINTE BLVD. APT. 233
City-St-Zip: SARASOTA, FL 342312611

Title: S (X) Change () Addition
Name: WHEELER, KIM L
Address: 1735 LANDINGS WAY
City-St-Zip: SARASOTA, FL 34231

Title: T (X) Change () Addition
Name: MOREY, LYNN A III
Address: 3908 EASTON TERRACE
City-St-Zip: SARASOTA, FL 34238

Title: VP () Change (X) Addition
Name: HOUFEK, PAMELA S
Address: 308 SIGNORELLI DR
City-St-Zip: NOKOMIS, FL 34275

Title: VP () Change (X) Addition
Name: CREIGHTON, CHERYL L
Address: 1414 N. LAKESHORE DR
City-St-Zip: SARASOTA, FL 34231

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNN A MOREY III

T

04/29/2009

Electronic Signature of Signing Officer or Director

Date