# FILED Apr 01, 2008 8:00 am Secretary of State

2008	FOR PROFIT CORPORATION	V
	ANNUAL REPORT	

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1. Entity Nam	MENT # 666287  onumber of the state of the s				A 0.	04-01-20	08 90005 037 ***	150.00
Principal Place of Business Mailing Address					40000	_	•	
,		•						
10606 SUMNER RD		201 EAGLENOOK WAY						
WIMAUMA, FL		OSPREY, FL 34229 US						
	33598					TURT TÜRE BERLERIK IDDI	CIER BIEN CHEN BIEN EICH EKEN	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03202008	Chg-P	CR2E034 (12/06)	
City & State		City & State		4. FEI Numbe		<del></del>	plied For	
33598	Country	Zip	Country		İ	of Status Desired	S8.75 Add Fee Required	itional
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New R	egistered Agent	
				Name				
KING, DO	UGLAS BLAIR	_			*			
	ENOOK WAY			Street Address (	P.O. Box Numbe	r is Not Acceptable	e)	
OSPREY,	FL 34229							
•								
· :·				City		·	FL Zip Code	3
- A - S								<u> </u>
	named entity submits this statement for tions of registered agent.	or the purpose of changing it	s register	ed office or registe	red agent, or bot	h, in the State of Flo	orida. I am familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NO	TE: Reg store	od Agent signature required	d when reinstating)		DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.	9. Election Campa Trust Fund Cor	_		.00 May Be fed to Fees			
10. OFFICERS AND DIRECTORS			11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTORS	3 IN 11
TITLE	Р	☐ Delete	TITL	F I			☐ Change	☐ Addition
NAME	KING, DOUGLAS BLAIR		NAN				L.J. 0.12.73	
STREET ADDRESS	201 EAGLEROOK WAY			EET ADDRESS				İ
CITY-ST-ZIP	OSPREY, FL 34229			r-ST-ZIP				
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indicatéd	certify that the information supplied wit fon this report or supplemental report i	s true and accurate and that	my signa	ature shall have the	same legal effect	t as if made under (	oath; that I am an officer	or director
of the co	rporation or the receiver or trustee emp	lowered to execute this repo	rt as requ	ired by Chapter 60	7, Florida Statute	s; and that my nam	e appears in Block 10 or	Block 11 if
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**Document Number** 

666287

**Business Entity Name** 

KING'S ENTERPRISES, INC.

**FEI Number** 

450321204

**FEI Number Status** 

Certificate of Status Desired No.

**Election Campaign Financing Trust Fund Contribution No** 

### **Principal Place of Business**

Address

10606 SUMNER RD

City, State

WMAUMA, FL

Zip Code & Country 33598 US

#### Mailing Address

Address

201 EAGLENOOK WAY

City, State

OSPREY, FL

Zip Code & Country 34229 US

### Name And Address of Registered Agent

RA Business Name KING, DOUGLAS BLAIR

Address

201 EAGLENOOK WAY

City, State

OSPREY, FL

Zip Code & Country 34229 US

### Officer/Director Name And Address

#### Name And Address #1

Title

**Entity Name** 

KING, DOUGLAS BLAIR

www.sunbiz.org - Department of State

ATTACHMENT

Page 2 of 2

**Street Address** 

201 EAGLEROOK WAY

City, State

OSPREY, FL

**Zip Code & Country** 

34229

Title

PRES Mo

Officer/Director Signature DOUGLAS BLAIR KING

Dagles Blan Key

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