2007 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 08, 2007 8:00 am Secretary of State 02-08-2007 90044 038 ***158.75 DOCUMENT #F35345 THE KING GROUP INC. 40011737 Principal Place of Business Mailing Address 372-1 BLANDING BLVD C/O DAVID A. KING, ATTORNEY ORANGE PARK, FL 32073 1416 KINGSLEY AVENUE 211 ORANGE PARK, FL 32073 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc 01092007 CR2E034 (12/06) Cha-P City & State City & State 4. FE! Number Applied For 59-2093194 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KING, DAVID A. Street Address (P.O. Box Number is Not Acceptable) ATTORNEY AT LAW 1416 KINGSLEY AVENUE ORANGE PARK, FL 32073 Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. X Change TITLE **PSTD** Delete TITLE Addition KING, KAREN LEE NAME NAME 342 FLEMING DRIVE STREET ADDRESS STREET ADDRESS 372 Blanding Boulevard, Suite 1 CITY-ST-ZIP GREEN COVE SPRINGS, FL CITY-ST-ZIP Orange Park, FL 32073 ☐ Change X Addition TITLE Delete TITLE DVP MAME NAME Ross, John W. STREET ADDRESS STREET ADDRESS 372 Blanding Boulevard, Suite 1 CITY-ST-ZIP CITY ST-ZIP Orange Park, FL 32073 Change ☐ Addition THE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZiP Change Addition Delete TITLE NAME MARK STREET ADDRESS STREET ADORESS CITY-S1-ZIP CITY ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE TITLE MAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY ST ZIP Change ☐ Addition ☐ Delete TITLE HILL NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. If 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 eath; 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 10 or Block 11 if

R OR DIRECTOR

FILED

904-272-7004

Davome Phone #

Karen L. King, President

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X