2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

May 22, 2007 8:00 am Secretary of State DOCUMENT # G91880 1. Entity Name 05-22-2007 90014 044 ***150.00 KINGTON MOBILE HOME PARK, INC. Principal Place of Business Mailing Address 7602 17TH AVE W. 7602 17TH AVE W. BRADENTON FL 34209-4804 **BRADENTON FL 34209-4804** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 59-2539426 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo POPE, JOHN F. 717 12TH ST. W. Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 33506** City 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 the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete IIII ☐ Change Addition KOSTER, JAMES NAME NAMI 7602 17TH AVE. W. STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CHY-S1-ZIP CHY ST 7IP PRESIDENT Delete 1011 ☐ Change Addition BETTEN, ROGER IRNIN BOERSEMA 7602 17TH AVE W. 7602 17TH AVE W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CHY SI-7IP BRADENTON, FL 34209 CHY-ST- AP VP Delete HILL 1011 Change (A) ddition BOERSEMA, BEVERLY NAMI NAMI 7602 17TH AVE W STREET ADDRESS STREET ADDRESS **BRADENTON FL 34204** CHY-SI-ZIP CHY+SL 7)P 11111 ☐ Delete 100 Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-7/P CHY SEZIP IIIII ☐ Defete ☐ Change ☐ Addition NAMI NAMI STREET ADDRESS STREET ADDRESS CITY - S1 - ZIP CHY-S1-ZIE ☐ Delete ☐ Change □ Addition NAME NAM STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

8 3 (58) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFF

FILED