## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS J49293 (0)DOCUMENT # KING'S VILLAGE, INC. Principal Place of Business Mailing Address 6800 SILVER STAR ROAD 6800 SILVER STAR ROAD ORLANDO FL 32818 ORLANDO FL 32818 3. Date incorporated or Qualified 3a. Date of Last Report 12/29/1986 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2744532 26 Not Applicable Suite, Apt #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Ζip Country $Z_{(0)}$ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **ANTHONY, CHRISTOS** 82 Street Address (P.O. Box Number is Not Acceptable) 6800 SILVER STAR ROAD ORLANDO FL 32818 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registers a aport and the diagram in (NOTE Registered Agent signature 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ĎΡ TITLE DELETE 1 1 Table Change Addition ANTHONY, CHRISTOS NAME 1.2 NAME 6800 SILVER STAR ROAD STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 14 CITY - ST - ZIP TITLE DELETE 2 1 THILE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS City - St - ZiP 24 City - St - ZIP TIT, E DELETE 3 1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZP 3 4 C+TY - ST - 7IP T-TLE DELETE 4 1 T TLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS. CITY-ST-ZIP 4.4 CH1Y - \$1 - ZIP TITLE DELETE 5 1 TITLE Change Addition | NAME 5.2 NAME STREFT ADDRESS 5.3 STREET ADDRESS CITY - ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I arm 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 12 or Block 13 if changed, prion an attachment with an address.

64CTY-ST-ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6 . HILE

6.2 NAME

SIGNATURE:

THILE

NAME

STREET ADDRESS

C-TY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED AME OF SIGNING OFFICER OR DIRECTOR

DELETE

4-30-96

407-293-2122

(12/95)

CR2E034

Change

Addition