2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006
Secretary of State

DOCUMENT# N02000001014

Entity Name: KINGS GATE RESIDENTS GROUP, INC.

Current Principal Place of Business:

24000 RAMPART BLVD.
PORT CHARLOTTE, FL 33980

New Principal Place of Business:

Current Mailing Address:

24000 RAMPART BLVD.
PO BOX 349
PORT CHARLOTTE, FL 33980

New Mailing Address:

24000 RAMPART BLVD.
PORT CHARLOTTE, FL 33980

FEI Number: 65-0915934 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CROMLEY, PATRICK
1692 PALACE CT
PORT CHARLOTTE, FL 33980 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: POHLMEYER, JOHN
Address: 1720 PICIDILLY CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: P ( ) Delete
Name: CROMLEY, PATRICK
Address: 1692 PALACE CT
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: T ( ) Delete
Name: RUFF, EVELYN
Address: 24320 BUCKINGHAM WAY
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: S ( ) Delete
Name: FRASER, JEAN
Address: 24296 WESTGATE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D ( ) Delete
Name: KERSHAW, JIM
Address: 24452 BUCKINGHAM WAY
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D ( ) Delete
Name: DOUGHERTY, JOE
Address: 24257 WESTGATE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33980

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: KERSHAW, JAMES
Address: 24452 BUCKINGHAM WAY
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: SNYDER, TED
Address: 24472 MANCHESTER TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVELYN M RUFF TREA 04/03/2006

Electronic Signature of Signing Officer or Director — Date