2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# N08000004035

Entity Name: A ROYAL GENERATION DEVELOPMENT OF KINGS AND QUEENS, INC.

Current Principal Place of Business:

24 BASS AVE. SW
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1626
FORT WALTON BEACH, DL 32549

New Mailing Address:

FEI Number: 26-0718256 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JONES, JERRY D
2292 ORYTANIA CIRCLE
NAVARRE, FL 32566 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:	CHRM	( ) Delete
Name:	JONES, JERRY D	
Address:	2292 PRYTANIA CIRCLE	
City-St-Zip:	NAVARRE, FL 32566	
Title:	VCHR	( ) Delete
Name:	GRANDBERRY, TIMOTHY	
Address:	1241 GABRIELLE DR.	
City-St-Zip:	CRESTVIEW, FL 32536	
Title:	S	( ) Delete
Name:	WATERS, LATASIA	
Address:	31 FLEET STREET	
City-St-Zip:	FORT WALTON BEACH, FL 32548	
Title:	T	( ) Delete
Name:	SULLIVAN, DIANE	
Address:	868 MANDE CT.	
City-St-Zip:	SHALIMAR, FL 32579	
Title:	D	( ) Delete
Name:	BRYANT, LATANYA MEMBER	
Address:	1047 DESTIN DRIVE	
City-St-Zip:	FORT WALTON BEACH, FL 32548	
Title:	D	( ) Delete
Name:	JONES, CARMEN MEMBER	
Address:	109 WEST AUDREY DRIVE	
City-St-Zip:	FORT WALTON BEACH, FL 32548	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: JERRY D. JONES PRES 02/05/2009
Electronic Signature of Signing Officer or Director — Date