2007 FOR PROFIT CORPORATION ANNUAL REPORT

May 08, 2007 8:00 am **Secretary of State** DOCUMENT # P00000078918 05-08-2007 90020 040 ***150.00 HORT KINGS, INC. Principal Place of Business Mailing Address 401000** 3949 EVANS AVE #205 3949 EVANS AVE #205 FORT MYERS, FL 33901 FORT MYERS, FL 33901 01082007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied Far 4. FEI Number 65-1038925 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required ----6. Name and Address of Current Registered Agent LETOURNEAU, MICHAEL DO NOT WRITE 3949 EVANS AVE #205 \$403 FORT MYERS; FL 33901 IN THIS SPACE 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 MICHAEL J. LETOURNEAU V. PRESIDENT SIGNATURE_ Signature, typed or gripted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE LETOURNEAU, MICHAEL NAME 3949•EVANS AVE #205 STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33901 TITLE MCCARLEY, PATRICK M NAME STREET ADDRESS 3949 EVANS AVE #205 CITY-ST-ZIP FORT MYERS, FL 33901 TITLE WALKER, WILLIAM C NAME STREET ADDRESS 3949 EVANS AVE #205 DO NOT WRITE CITY-ST-ZIP FORT MYERS, FL 33901 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 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:	MINE	MICHAEL J. LETOURNEAU	V. PLESIDENT	4-18-2007	239 454-0300
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date	Daytime Phone # FXT 20/

STREET ADDRESS CITY-ST-ZIP