2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000043748

Entity Name: KING'S GATE REALTY, INC.

FILED Apr 06, 2009 Secretary of State

Thirty Name: (1110 0 5) (12 (2) (2) (1) (110).						
Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
290B AVE OF KINGS NOKOMIS, FL 34275				290-B AVE OF KINGS NOKOMIS, FL 34275		
Current Mailing Address:			New Mailii	New Mailing Address:		
290B AVE OF KINGS NOKOMIS, FL 34275				290-B AVE OF KINGS NOKOMIS, FL 34275		
FEI Number:	El Number: 03-0518005 FEI Number Applied For () FEI Nu		FEI Number Not Appli	nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
DOMBER, HARLAN R ESQ 3900 CLARK RD STE L-1 SARASOTA, FL 34233 US						
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	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () D INGERICK, RUTH 151 DUCHESS A' NOKOMIS, FL 34	VE	Title: Name: Address: City-St-Zip:	P (X) FISHER, DONA 234 DUCHESS NOKOMIS, FL	AVE	
Title: Name: Address: City-St-Zip:	T () C STEARS, CHARL 67 KING ARTHUF NOKOMIS, FL 34	RDR	Title: Name: Address: City-St-Zip:	T (X) ALEX, CHARLO 35 CASTLE DR NOKOMIS, FL		
Title: Name: Address: City-St-Zip:	S ()E PILLAR, MELANII 10CASTLE DR NOKOMIS, FL 34		Title: Name: Address: City-St-Zip:	VP (X) PILLAR, MELAN 1 CASTLE DR NOKOMIS, FL		
Title: Name: Address: City-St-Zip:	VP () E FISHER, DONALE 234 DUCHESS A' NOKOMIS, FL 34	VE	Title: Name: Address: City-St-Zip:	S (X) HARDESTY, KA 21 CASTLE DR NOKOMIS, FL		
Title: Name: Address: City-St-Zip:	D () E LOGAN, SUE 129 CAMELOT D NOKOMIS, FL 34		Title: Name: Address: City-St-Zip:	()	Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD FISHER PRES 04/06/2009