2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000043748

FILED Sep 02, 2009 Secretary of State

Entity Name: KING'S GATE REALTY, INC. **Current Principal Place of Business: New Principal Place of Business:** 290-B AVE OF KINGS NOKOMIS, FL 34275 **Current Mailing Address: New Mailing Address:** 290-B AVE OF KINGS NOKOMIS, FL 34275 FEI Number: 03-0518005 FEI Number Applied For () FEI Number 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 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FISHER, DONALD Name: Name: 234 DUCHESS AVE Address: Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ALEX. CHARLOTTE Name: 35 CASTLE DR Address: Address: NOKOMIS, FL 34275 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition VΡ VΡ PILLAR, MELANIE PATRICCA, CHERYL H Name: Name: 1 CASTLE DR 261 CAMELOT DR Address: Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: NOKOMIS, FL 34275 Title: () Delete Title: () Change () Addition HARDESTY, KAROLYN K Name: Name: Address: 21 CASTLE DR Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: Title: Title: () Delete () Change () Addition LOGAN, SUE Name: Name:

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.

Address:

City-St-Zip:

Ρ SIGNATURE: DONALD FISHER 09/02/2009

129 CAMELOT DRIVE

NOKOMIS, FL 34275

Address: City-St-Zip: