

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134407

FILED  
May 01, 2009  
Secretary of State

Entity Name: GARY C. KING, INC.

**Current Principal Place of Business:**

501 SOUTH CRANE ST.  
SEBRING, FL 33872

**New Principal Place of Business:**

501 CRANE ST.  
SEBRING, FL 33872

**Current Mailing Address:**

501 SOUTH CRANE ST.  
SEBRING, FL 33872

**New Mailing Address:**

501 CRANE ST.  
SEBRING, FL 33872

FEI Number: 20-0427660

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

KING, GARY C  
501 SOUTH CRANE ST.  
SEBRING, FL 33872 US

**Name and Address of New Registered Agent:**

KING, GARY C  
501 CRANE ST.  
SEBRING, FL 33872 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

05/01/2009

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KING, GARY C  
Address: 501 CRANE ST  
City-St-Zip: SEBRING, FL 33872

Title: STD ( ) Delete  
Name: KING, KATHLEEN M  
Address: 501 SOUTH CRANE ST.  
City-St-Zip: SEBRING, FL 33872

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: STD (X) Change ( ) Addition  
Name: KING, KATHLEEN M  
Address: 501 CRANE ST.  
City-St-Zip: SEBRING, FL 33872

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: GARY C. KING

Electronic Signature of Signing Officer or Director

PRES

05/01/2009

Date