

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000092058

FILED  
Jan 13, 2005  
Secretary of State

Entity Name: MEL KING ENTERPRISES, INC.

**Current Principal Place of Business:**

1299 BILTMORE DRIVE  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

1299 BILTMORE DRIVE  
FORT MYERS, FL 33901

**New Mailing Address:**

FEI Number: 42-1633656

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEGRANDE, J.L. "RAY"  
2069 FIRST STREET  
SUITE 302  
FORT MYERS, FL 33901 US

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

LEGRANDE, J.L.  
2069 FIRST STREET  
SUITE 302  
FORT MYERS, FL 33901 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: J L LEGRANDE

01/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KING, MEL  
Address: 1299 BILTMORE DRIVE  
City-St-Zip: FORT MYERS, FL 33901

Title: VP ( ) Delete  
Name: KING, CHARLOTTE  
Address: 1299 BILTMORE DRIVE  
City-St-Zip: FORT MYERS, FL 33901

Title: T ( ) Delete  
Name: PETERSON, DONALD  
Address: 8099 QUEEN PALM LANE, #216  
City-St-Zip: FORT MYERS, FL 33912

Title: S ( ) Delete  
Name: VANDERBURGH, WILLIAM  
Address: 936 ADELPHI COURT  
City-St-Zip: FORT MYERS, FL 33919

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MEL KING

P

01/13/2005

Electronic Signature of Signing Officer or Director

Date