

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 08 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000009509 (0)
1. Corporation Name
KING RICHARDS, INC.



Principal Place of Business
6780 AIRPORT ROAD NORTH
NAPLES FL 33940

Mailing Address
6780 AIRPORT ROAD NORTH
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/04/1992

4. FEI Number
65-0372366

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, BEATRICE
680 PARTRIDGE CT.
965 NORTH COLLIER BLVD.
MARCO ISLAND FL 33937

81 Name Beatrice Clark
82 Street Address (P.O. Box Number is Not Acceptable)
6780 N Airport Rd
83
84 City Naples FL 85 Zip Code 34109

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE Beatrice Clark DATE 4/30/98

12. OFFICERS AND DIRECTORS (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-----------------------|---|----------|
| TITLE | NAME | 1.1 TITLE | 1.2 NAME |
| P | CLARK, RICHARD | | |
| STREET ADDRESS | 680 PARTRIDGE COURT | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | MARCO ISLAND FL 33937 | 1.4 CITY-ST-ZIP | |
| V | BICKLE, ROBERT | 2.1 TITLE | 2.2 NAME |
| STREET ADDRESS | 670 PARTRIDGE COURT | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | MARCO ISLAND FL 33937 | 2.4 CITY-ST-ZIP | |
| ST | BICKLE, DEBORAH | 3.1 TITLE | 3.2 NAME |
| STREET ADDRESS | 670 PARTRIDGE COURT | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | MARCO ISLAND FL 33937 | 3.4 CITY-ST-ZIP | |
| | | 4.1 TITLE | 4.2 NAME |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| | | 5.1 TITLE | 5.2 NAME |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| | | 6.1 TITLE | 6.2 NAME |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 4/30/98

CR2E034 (10/97)