

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 29, 2003 8:00 am
Secretary of State

05-29-2003 90137 049 ***163.75

DOCUMENT # *P93000088293*

1. Entity Name

ST JAMES & KING FINANCIAL GROUP, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2561 VILLAGE BLVD.

Suite, Apt. #, etc.

SUITE 104

City & State

W. PALM BEACH, FL.

Zip

33409

Country

PALM BEACH

3. Mailing Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0455617

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

JAMES K. FREESE

Street Address (P.O. Box Number is Not Acceptable)

2561 VILLAGE BLVD. #104

City

W. PALM BEACH

FL

Zip Code

33409

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

James K. Freese

JAMES K. FREESE, PRESIDENT

5-29-03

(NOTE: Registered Agent Signature required when reinstating)

DATE

January 1 - May 1: Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
<i>PRESIDENT</i>	<i>JAMES K. FREESE</i>	<i>2561 VILLAGE BLVD. #104</i>	<i>W. PALM BEACH, FL. 33409</i>

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

James K. Freese

JAMES K. FREESE, PRESIDENT

5-29-03

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Daytime Phone #

CR2E034B (12/02)