FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P94000065368 (0)

KING & GALLAGHER INVESTMENTS INC.

Principal Place of Business Mailing Address 4475 F ASHTON ROAD 4475 F ASHTON ROAD SARASOTA FL 34233 SARASOTA FL 34233 3. Date Incorporated or Qualified 3a. Date of Last Report 08/31/1994 4. FEI Number 04/20/1995 Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 65-0570260 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Added to Fees Trust Fund Contribution 28 23 Co Country Zip 29 30 25 24 Name and Address of Current Registered Agent

KING, JOHN R 4475 F ASHTON ROAD SARASOTA FL 34233

ountry	 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☒ No 			
7	10. Name and Address of New Registered Agent			
81	Name			
82	Street Address (P.O. Box Number is Not Acceptable)			
83				
84	City FI 85 Zip Code			

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					
Signature, types or printed name of registeric agent and title if applicable (NOTE: Registered Agent signature required when revisitating)					
12.	OFFICERS AND DIRECTORS DELETE	1.1 TITLE	Change Addition		
HILE	CPD		<u> </u>		
NAME	KING, JOHN R	1.2 NAME			
STREET ADDRESS	4475 ASHTON ROAD	1.3 STREET ADDRESS			
CHTY-ST-ZIP	SARASOTA FL 34233	1 4 CITY-ST-ZIP	Change Addition		
TITLE	VSTD DELETE	2 1 TITLE	Custome T vacation		
NAME	GALLAGHER, CHRISTOPHER G.	2.2 NAME			
STREET ADDRESS	4475F ASHTON ROAD	2.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34233	2.4 CITY - ST - ZIP			
TITLE	DELETE	3 1 TITLE	Change Addition		
NAME		3 2 NAME			
STREET ADDRESS		33 STREET ADDRESS			
CITY-ST-ZIP		3 4 CITY - \$1 - 7IP			
TITLE	DELETE	4 1 THILE	☐ Change ☐ Addition		
NAME		4.2 NAME			
STREET ADDRESS		4.3 STREET AUDRESS			
CiTY-ST-ZiP		4.4 CITY - ST - ZIP			
TITLE	☐ DELETE	5 1 TITLE	☐ Change ☐ Addition		
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIF		54 CITY-ST-ZIP			
TOLE	☐ DELETE	6 1 THTLE	☐ Change ☐ Addition		
NAME		6 2 NAME			
STREET ADDRESS		6 3 STREET ADDRESS			
CHTY - ST - ZIP		6 4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

John R. King, Pres.