2004 FOR PROFIT CORPORATION ANNUAL REPORT				FILED Apr 30, 2004 08:00 AM		
1. Entity Nam	MENT # P950000343 King, Inc.	07 * -		Secretary of State		
1505 N WHEELER ST 5532		Mailing Address 5532 CHERRY RD. LAKELAND, FL 33810 US				
DO NOT WRITE IN THIS SPACE				03252004 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 65-0645178 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required Fee Required		
WILSON, TROY D 1505 N WHEELER ST PLANT CITY, FL 33566			DO NOT WRITE IN THIS SPACE			
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 Signature. typed or printed name of registered agent and table if applicable (NOTE, Registered Agent agreeture required when reinstang) DATE EILE NOVERTI, CEE IS \$450.00 S. Election Campaign Financing S. ON May Be						
	E NOWII FEE IS \$150.00 ay 1, 2004 Fee will be \$550,00	Trust Fund Contribution.		00 May Be ed to Fees		
TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE	OFFICERS AND DIR P WILSON, TROY D. 1302 CLARKWOOD DRIVE PLANT CITY, FL VPS				U(00000142602 340-550-54-806552-6031 - 650000	
NAME STREET ADORESS CITY-ST-ZIP TITLE	WILSON, BETTY 1302 CLARKWOOD DRIVE PLANT CITY, F S	· · · · · · · · · · · · · · · · · · ·				
NAME STREET ADDRESS CITY - ST - ZIP	HALE, CHERRY A 5532 CHERRY ROAD LAKELAND, FL 33810 T HALE, DONALD E 5532 CHERRY ROAD LAKELAND, FL 33810			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS City - St - ZIP						
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
 I hereby c indicated of the cor changed, 	sertify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empower or on an attachment with an address, with	filing does not qualify for the exe e and accurate and that my signa red to execute this report as requi all other like empowered.	mption stated in Se- ture shall have the s red by Chapter 607	ction 119.07(3)(i) ame legal effect , Florida Statutes), Florida Statutes. I further certify that the information as if made under oath; that I am an officer or director ;; and that my name appears in Block 10 or Block 11 if	
SIGNAT		ED NAME OF SIGNING OFFICER OR DIRECT	RRY A HA	ILE	4/9/04 863-859-1289 Date Daysma Prone #	