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

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Scoretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P95000070330	(2)
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P.A. KING BUILDERS INC

F-M- N	ing buildens inc.					
Principa! Place	of Business	Mailing .	Address			I CORTINGAL THE ABART BATHLE BRAIN BOTH BOTH BOTH BESON WISE HAVE BOTH THE
5560 BEE RI SARASOTA I	DGE ROAD D-2 FL 34233		BEE RIDGE ROA SOTA FL 34233	D D-2		
						3. Date Incorporated or Qualified 3a. Date of Last Report 09/08/1995
2. Principal Place of Business 2a. Mailing Address 21 26					4. FEI Nuniber Applied For 65-067/076 Not Applicable	
Suite, Apt #, etc. Suite, Apt #, etc. 27			5. Certificate of Status Desired See Require			
City & State		28	& State			6. Election Campaign Financing \$5.00 May Be 1 rust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 29		Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes Yoo
	9. Name and Address of Curr	ant Registered	Agent		T	10. Name and Address of New Registered Agent
VIII.0 D				81	Name	me
KING, PHILLIP 5560 BEE RIDGE ROAD D-2			82 Street		eet Address (P.O. Box Number is Not Acceptable)	
SARASO	OTA FL 34233			83		
				84	City	y FL 85 Zip Code
or registeri	o the provisions of Sections 607.06 ed agent, or both, in the State of Fic h, and accept the obligations of, Se	onda Such char	nge was authonz	ed by the corp	narned c socation's	d corporation submits this statement for the purpose of changing its registered office on's board of directors. I hereby accept the appointment as registered agent. I am
SIGNATURE						
	Signature, typed or profest name of repotential agr				d signature	Contribution which the state of
12.	OFFICENS A	ND DIRECTORS	S DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	PHILLIP KING		(2) bearing	1 1 TIFLE		Change Addition
STREET ADDRESS	5560 BEE 7 DE	1 Rs		1.2 NAME	. Athonices	
CITY - ST - ZIP	SARASOTA FL.	34233		1	LADDRESS Etilizio	
TI'LE	<u> </u>	07/0-	TAMELLE 2	2 1 Tillue	5 - 7 P	Change Addition
NAME _	ALIVETA A XT	\sim	< THE	22 NAME		onange varion
STREET ADDRESS	JOHN EL DOPAN	0	Kura Pa	2 3 STALE		ess
C:TY-ST-ZiP /	cape deral f	K 58	DELÉTÉ	24 CITY 5	3* - Z⊅	
NAME .			L DECEIE	3 1 TITLE		Change Addition
				3.2 NAME	- **************	
STREET ADDRESS				3.1 STREE		ESS
City - ST - ZiP TiTLE			DELETE	3.4 C:TY - 5	31 - ZIF	Charge D Addition
NAME			_ occere			☐ Change ☐ Addit on
				4.2 NAME	- F-5-5-5-2-3	
STREET ADDRESS				4 3 STREET		(85)
CITY-ST-ZIP TITLE			DELETE	4.4 City - 9 5.1 Tifle	1 - ZIF	Chura D Addiso
NAME			Orten			Change Addition
				5.2 NAME	- Maries Au	
STREET ADDRESS				5.3 STREET		:SS
CITY - ST - ZIP TITLE			DELETE	5.4 City - S	1 - 2(P	
NAME			Detter	6 1 TITLE		Change Addition
STREET ADDRESS				6 2 NAME		
				63 S18661		
CITY - ST - ZIP				6.4 CITY - 9	T - ZIP	1

SIGNATURE: ____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this firing 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 supplienced in 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 perpendicular 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 only attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1. Cat:

Distance Fixed B.