

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Jun 03 1998 8:00 am
Secretary of State

DOCUMENT # P97000038558 (7)

1. Corporation Name

OLD KINGS INTERCHANGE, INC.



Principal Place of Business

4 OLD KINGS RD., N.
PALM COAST FL 32137

Mailing Address

4 OLD KINGS RD., N.
PALM COAST FL 32137

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/30/1997

4. FEI Number

59-3446685

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

21 4 Old Kings Rd N

Suite, Apt. #, etc.

22 Suite B

City & State

23 Palm Coast FL

Zip

24 32137

Country

25 Flagler

2a. Mailing Address

26 4 Old Kings Rd N

Suite, Apt. #, etc.

27 Suite B

City & State

28 Palm Coast, FL

Zip

29 32137

Country

30 Flagler

9. Name and Address of Current Registered Agent

PIO, MARGARET M
4 OLD KINGS RD., N.
PALM COAST FL 32137

10. Name and Address of New Registered Agent

81 Name

Michael D. Chiumento

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

4 Old Kings Road, North

83

84 City

Palm Coast

FL

85 Zip Code

32137

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 of officer or principal name of registered agent, or both, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/98

12. OFFICERS AND DIRECTORS

TITLE D

NAME PIO, MARGARET M
STREET ADDRESS 1111-2 MONTICELLO LN.
CITY-ST-ZIP PORT ORANGE FL 32119

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

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STREET ADDRESS

CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President/D

1.2 NAME David Gibbs

1.3 STREET ADDRESS 1509 Oak Forest Drive

1.4 CITY-ST-ZIP Ormond Beach, FL 32074

2.1 TITLE Vice President/D

2.2 NAME John Gazzoli

2.3 STREET ADDRESS 3 Cole Place

2.4 CITY-ST-ZIP Palm Coast, FL 32137

3.1 TITLE Sec/Tres/D

3.2 NAME Michael D. Chiumento

3.3 STREET ADDRESS 4 Old Kings Road, North

3.4 CITY-ST-ZIP Palm Coast, FL 32137

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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.

CR2E034 (10/97)