

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000038558

FILED  
Jan 18, 2004  
Secretary of State

Entity Name: OLD KINGS INTERCHANGE, INC.

## Current Principal Place of Business:

5 MONTILLA PLACE  
PALM COAST, FL 32137 US

## New Principal Place of Business:

## Current Mailing Address:

5 MONTILLA PLACE  
SUITE B  
PALM COAST, FL 32137 US

## New Mailing Address:

5 MONTILLA PLACE  
PALM COAST, FL 32137 US

FEI Number: 59-3446685

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARDNER, JAMES  
5 MONTILLA PLACE  
PALM COAST, FL 32137 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GIBBS, THOMAS  
Address: 33 S SUGARMILL LN.  
City-St-Zip: PALM COAST, FL

Title: VPD ( ) Delete  
Name: GAZZOLI, JOHN  
Address: 3 COLE PL  
City-St-Zip: PALM COAST, FL

Title: D ( ) Delete  
Name: CHIUMENTO, MICHAEL D  
Address: 4 OLD KINGS RD N  
City-St-Zip: PALM COAST, FL

Title: STD ( ) Delete  
Name: GARDNER, JAMES  
Address: 5 MONTILLA PL.  
City-St-Zip: PALM COAST, FL 32137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES E. GARDNER

STD

01/18/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date