


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # V21788</b> 1. Entity Name SEVEN KINGS MANAGEMENT, INC.	
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Principal Place of Business 630 MAPLEWOOD DRIVE 100 JUPITER, FL 33458 US	Mailing Address 630 MAPLEWOOD DRIVE 100 JUPITER, FL 33458 US
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01232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0388060	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  TAYLOR, WILLIAM E 630 MAPLEWOOD DRIVE 100 JUPITER, FL 33458
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IN THIS SPACE

8. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	CD
NAME	SOLOMON, JOHN C II
STREET ADDRESS	630 MAPLEWOOD DRIVE, #100
CITY-ST-ZIP	JUPITER, FL 33458
TITLE	CFO
NAME	TAYLOR, WILLIAM E
STREET ADDRESS	630 MAPLEWOOD DRIVE, #100
CITY-ST-ZIP	JUPITER, FL 33458
TITLE	PD
NAME	GRAZIOTTO, RAYMOND E
STREET ADDRESS	630 MAPLEWOOD DRIVE, #100
CITY-ST-ZIP	JUPITER, FL 33458
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000712533  
04/26/07-80049-025 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>William E. Taylor</u> <i>William E. Taylor CFO</i>	Date: <u>4-16-07</u>	Daytime Phone #: <u>561-625-9443</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #