


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 08:00 AM
Secretary of State

DOCUMENT # F05000001839

1. Entity Name
 KINGGUINN ASSOCIATES, P.A., INC.



Principal Place of Business
 1309 AMBLE DRIVE
 CHARLOTTE, NC 28206

Mailing Address
 1309 AMBLE DRIVE
 CHARLOTTE, NC 28206

DO NOT WRITE IN THIS SPACE



02202006 No Chg-P CR2E034 (11/05)

4. FEI Number
 56-1010959

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMAS, JOHN
 CRESCENT RESOURCES
 300 PRIMERA BOULEVARD, SUITE 140
 LAKE MARY, FL 32746

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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 _____
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, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

0000004 78888
 04/06/06-80003-003 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GUINN, TERRELL B P.E. 1309 AMBLE DRIVE CHARLOTTE, NC 28206
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V MCGINNIS, LAWRENCE A P.E. 1309 AMBLE DRIVE CHARLOTTE, NC 28206
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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: Terrell B. Guinn **TERRELL B. GUINN** 3/14/06 704-597-1340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #