I hereby 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 all other like empowered.

SIGNATURE: ANN KING

RE. ANN KING

Electronic Signature of Signing Officer/Director Detail

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT DOCUMENT# P05644

Entity Name: KING BUSINESS FORMS CORPORATION

Current Principal Place of Business:

531 STRAIGHT CREEK ROAD NEW TAZEWELL, TN 37825

Current Mailing Address:

P.O. BOX 1467 NEW TAZEWELL, TN 37824 US

FEI Number: 62-0875173

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US

SYSTEM

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

Officer/Director Detail :

Title	STD	Title	PD
Name	KING, ANN	Name	KING, JIMMY
Address	6315 EMORY ROAD, E.	Address	6315 EMORY ROAD, E.
City-State-Zip:	KNOXVILLE TN 37938	City-State-Zip:	KNOXVILLE TN 37938
Title	46T		
THIC	AST		
Name	SCOTT, LORI		

SECRETARY & TREASURER

04/08/2016

FILED Apr 08, 2016 Secretary of State CC4780912889

Certificate of Status Desired: No

Date