

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 05, 2000 8:00 am
Secretary of State

04-05-2000 90064 025 ***150.00

DOCUMENT # K00446

1. Entity Name

A. KNIGHT INDUSTRIES, INC.

Principal Place of Business

Mailing Address

% C. RICHARD FULMER, JR.
 2231 SW 59 AVE
 HOLLYWOOD FL 33023
 US

% C. RICHARD FULMER, JR.
 P. O. BOX 2005
 HOLLYWOOD FL 33022
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

P.O. Box 222005

Hollywood, FL.

33022-2005

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0015561

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FULMER, C. RICHARD, JR.
1410 GRANT ST.
HOLLYWOOD FL 33020

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	C	<input type="checkbox"/> Delete
NAME	WALKER, KEN	
STREET ADDRESS	1410 GRANT ST.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	WALKER, MICH	
STREET ADDRESS	1410 GRANT ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WALKER, TERESA	
STREET ADDRESS	1411 GRANT ST FRONT	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	ST	<input type="checkbox"/> Delete
NAME	WALKER II, KEN	
STREET ADDRESS	1411 GRANT ST.	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	MILLER, SUE	
STREET ADDRESS	1170 ARTHUR ST	
CITY-ST-ZIP	HOLLYWOOD FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ken Walker **Ken Walker**

Date

Daytime Phone #

1-10-00 **1-10-00 954-983-9401**

CR2E034 (9/99)