## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001021

Entity Name: WHITE KNIGHTS, LLC

FILED Apr 01, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5527 SW ANHINGA AVE PALM CITY, FL 34990

Current Mailing Address: New Mailing Address:

5527 SW ANHINGA AVE PALM CITY, FL 34990

FEI Number: 20-0555136 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK INC.

11380 PROSPERITY FARMS RD #221E

PALM BEACH GARDENS, FL 33410 US

SALMON-HUTCHINSON, CAROLE M J
5527 SW ANHINGA AVENUE
PALM CITY, FL 34990 US

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: CAROLE SALMON-HUTCHINSON 04/01/2005

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition
Name: SALMON-HUTCHINSON, CAROLE Name: SALMON-HUTCHINSON, CAROLE M J

 Address:
 5527 SW ANHINGA AVE
 Address:
 5527 SW ANHINGA AVE

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 PALM CITY, FL 34990

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HUTCHINSON, L. RON
 Name:

 Address:
 5527 SW ANHINGA AVE
 Address:

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WEIR, DAVID A
 Name:

 Address:
 5527 SW ANHINGA AVE
 Address:

 City-St-Zip:
 PALM CITY, FL 34990
 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CAROLE SALMON-HUTCHINSON MS. 04/01/2005