

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005865

FILED  
Feb 09, 2012  
Secretary of State

**Entity Name:** KNIGHT CHARITABLE FOUNDATION, INC.

**Current Principal Place of Business:**

EDWARD B. KNIGHT  
336 DUVAL STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

EDWARD B. KNIGHT  
336 DUVAL STREET  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:** 65-0882023

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KNIGHT, EDWARD B  
336 DUVAL STREET  
KEY WEST, FL 33040 US

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

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

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: KNIGHT, EDWARD B  
Address: 336 DUVAL STREET  
City-St-Zip: KEY WEST, FL 33040

Title: D  
Name: SPOTTSWOOD, ROBERT  
Address: 336 DUVAL STREET  
City-St-Zip: KEY WEST, FL 33040

Title: D  
Name: SPOTTSWOOD, JOHN M  
Address: 506 FLEMING STREET  
City-St-Zip: KEY WEST, FL 33040

Title: D  
Name: SPOTTSWOOD, WILLIAM B  
Address: 506 FLEMING ST.  
City-St-Zip: KEY WEST, FL 33040

Title: D  
Name: LOWELL, CHICK  
Address: 115 SW 89TH WAY  
City-St-Zip: CORAL SPRINGS, FL 33071

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD B. KNIGHT

D

02/09/2012

Electronic Signature of Signing Officer or Director

Date