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: GERALD STRYKER

Electronic Signature of Signing Officer/Director Detail

PRESIDENT/CEO

Certificate of Status Desired: No

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	: JOHN R. GILLESPIE			09/16/2015
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	CD	Title	TREASURER	
Name	KNIBLOE, II, CPA, WILLIAM G	Name	CRISSY, JACK	
Address	401 EAST LAS OLAS BLVD.	Address	404 E. ATLANTIC BLVD.	
City-State-Zip:	1100 FT. LAUDERDALE FL 33301	City-State-Zip:	POMPANO BEACH FL 33060	
Title Name Address City-State-Zip:	SD GRANT, PAULINE 201 E. SAMPLE ROAD POMPANO BEACH FL 33064	Title Name Address City-State-Zip:	VC SIMPSON, PAUL 1514 NE 7TH STREET FT. LAUDERDALE FL 33304	
Title Name Address City-State-Zip:	PRESIDENT, CEO STRYKER, GERALD 651 VILLAGE DRIVE POMPANO BEACH FL 33060			

2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 741760

Entity Name: JOHN KNOX VILLAGE OF FLORIDA, INC.

Current Principal Place of Business:

651 VILLAGE DRIVE POMPANO BEACH, FL 33060

Current Mailing Address:

651 VILLAGE DRIVE POMPANO BEACH, FL 33060 US

FEI Number: 59-1800721

Name and Address of Current Registered Agent:

GILLESPIE, JOHN R 2211 NE 36TH STREET SUITE #203 LIGHTHOUSE POINT, FL 33064 US

FILED Sep 16, 2015 Secretary of State CC7055880577

09/16/2015 Date