

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000019344

**Entity Name:** KNOPF ENTERPRISES, LLC

**Current Principal Place of Business:**

1817 FLORIDA AVE.  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

1817 FLORIDA AVE.  
JACKSONVILLE, FL 32206

**FEI Number:** 20-1926834

**Certificate of Status Desired:** No

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

KNOPF, RALPH J  
3641 EVE DRIVE WEST  
JACKSONVILLE, FL 32246-4735 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KNOPF, RALPH J  
Address 3641 EVE DRIVE WEST  
City-State-Zip: JACKSONVILLE FL 32246-4735

Title MGRM  
Name KNOPF, RONALD W  
Address 8869 BRIARWOOD ROAD  
City-State-Zip: JACKSONVILLE FL 32257

Title MGRM  
Name KNOPF, RAYMOND E  
Address 5556 MANFIELDS PLACE  
City-State-Zip: JACKSONVILLE FL 32207-5972

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RALPH KNOPF

MARKETING MANAGER

01/08/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date