

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000003623

**Entity Name:** KNOWLES-BLOODWORTH, INC

**Current Principal Place of Business:**

709 BRANTENBURG WAY  
LUTZ, FL 33548

**Current Mailing Address:**

709 BRANTENBURG WAY  
LUTZ, FL 33548 US

**FEI Number:** 47-5509989

**Certificate of Status Desired:** No

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

KNOWLES, LARRY  
709 BRANTENBURG WAY  
LUTZ, FL 33548 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

**Officer/Director Detail :**

Title CP  
Name KNOWLES, LARRY  
Address 709 BRANTENBURG WAY  
City-State-Zip: LUTZ FL 33548

Title VCP  
Name KNOWLES, JEFFREY  
Address 20301 ASH GROVE  
City-State-Zip: TAMPA FL 33647

Title DS  
Name KNOWLES, RYAN  
Address 6381 W. MCLAURIN  
City-State-Zip: TAMPA 33647

Title DVP  
Name BLOODWORTH, RANDI  
Address 2141 STONEVIEW ROAD  
City-State-Zip: ODESSA FL 33556

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

**SIGNATURE:** LARRY N KNOWLES

**PRESIDENT**

**02/22/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date