FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 276705

(1)

S.N. KNIGHT & SONS, INC.

Principal Place of Business Mailing Address 205 S.W. 1ST STREET 205 S.W. 1ST STREET BELLE GLADE FL 33430 BELLE GLADE FL 33430-3469 3. Date Incorporated or Qualified 3a. Date of Last Report 12/19/1963 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 59-1195657 26 Not Applicable Suite, Apt. #, etc. Suite Aot #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees ZIE Country Z_{i0} Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NOWICKI, MARK J. 14155 US HIGHWAY ONE Street Address (P.O. Box Number is Not Acceptable) **SUITE 302** JUNO BEACH FL 33408 83 R4 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Stignature, typed or pricting name of registered agent and title if applicable (NOTE Registered Agent signature required when rainstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 11 TITLE ☐ Change Addition KNIGHT, S.N. J NAME 1.2 NAME 205 S.W. 1ST STREET STREET ADDRESS 13 STREET ADDRESS BELLE GLADE FL CITY-ST-7P 1.4 CITY - ST- ZIP DELETE THE 21 TITLE Change ☐ Addition WILLIAMS, STEVEN L NAME 22 NAME **205 S.W. 1ST STREET** STREET ADDRESS 2 3 STREET ADDRESS BELLE GLADE FL CITY-ST-7:P 2 4 City-St-ZIP DELETE 1-11.6 Change 31 TITLE Addition HOPPER. CHRISTOPHER C NAME 3.2 NAME 205 S.W. 1ST STREET STREET ADDRESS 3.3 STREET ADDRESS BELLE GLADE FL CITY-ST-ZIP 3 4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change Addition HODGE, SHERYL K NAME 4. 2 NAM8 205 S.W. 1ST STREET STREET ADDRESS 4.3 STREET ADDRESS BELLE GLADE FL CITY - ST - 21F 4.4 CITY - ST - ZIP DELETE TITLE Change Addition 5.1 TITLE KNIGHT, STEPHEN A NAME 5.2 NAME 205 S.W. 1ST STREET STREET ADORESS 5.3 STREET ADDRESS BELLE GLADE FL 011 - ST- 21P 5.4 CITY - ST - ZIP THLE DELETE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-\$1-78 6.4 CITY - ST - ZIP

SIGNATURE:

appears in Block 12 or Block 13 if changed, or 🦣 ar

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PURE

Steven L. Williams Exec. Vice President

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiptor trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

02/11/97

561-996-6262

(96/6)

FILED

Feb 25 1997 8:00am

Secretary of State