2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 616877

Entity Name: KNIGHT JON BOY, INC.

FILED Mar 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 805 WEST WOODY BLVD. 805 WEST WOODY BLVD. P.O. BOX 914 BUNNELL, FL 32110 BUNNELL, FL 32110 **Current Mailing Address: New Mailing Address:** 805 WEST WOODY BLVD. P. O. BOX 914 P.O. BOX 914 BUNNELL, FL 32110 BUNNELL, FL 32110 FEI Number: 59-1900053 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KNIGHT, ARLENE FAYE 805 WEST WOODY BLVD BUNNELL, FL 32010 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition KNIGHT, ARLENE FAYE, Name: Name: 115 FLAGLER AVE. N. Address: Address: City-St-Zip: FLAGLER BEACH, FL City-St-Zip: Title: Title: (X) Change () Addition () Delete FULFORD, JONI, Name: Name: FULFORD, JONI. 3045 ST RD 40 Address: 3045 ST RD 40 Address: ORMOND BEACH, FL 32174 ORMOND BEACH, FL City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. I further 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 an address, with all other like empowered.

SIGNATURE: ARLENE KNIGHT PD 03/30/2007