

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 616877

Entity Name: KNIGHT JON BOY, INC.

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

705 WEST WOODY BLVD.  
BUNNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 914  
BUNNELL, FL 32110

**New Mailing Address:**

FEI Number: 59-1900053

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KNIGHT, ARLENE FAYE  
705 WEST WOODY BLVD.  
BUNNELL, FL 32010 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KNIGHT, ARLENE FAYE  
Address: 115 FLAGLER AVE. N.  
City-St-Zip: FLAGLER BEACH, FL

Title: VP  
Name: FULFORD, JONI  
Address: 3045 ST RD 40  
City-St-Zip: ORMOND BEACH, FL 32174

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: JONI FULFORD

VP

02/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date