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Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 654347

(4)

1. Corporation Name

JAMES W. KNIGHT ELECTRIC, INC.

Principal Place of Business

3810 US HWY 41 SOUTH TPA 33619
P.O. BOX 5992
TAMPA FL 33675

Mailing Address

3810 US HWY 41 SOUTH TPA 33619
P.O. BOX 5992
TAMPA FL 33675-5992
US



3. Date Incorporated or Qualified

01/31/1980

3a. Date of Last Report

02/02/1996

4. FEI Number

59-2009529

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

KNIGHT, JAMES W.
11001 RIVERVIEW DR
RIVERVIEW FL 33569

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE	V	DELETE
NAME	KILBOURNE, KEVIN M	
STREET ADDRESS	4355 SIESTA ROAD	
CITY-ST-ZIP	BROOKSVILLE FL	
TITLE	P	DELETE
NAME	KNIGHT, JAMES W	
STREET ADDRESS	99907 RIVER DRIVE	
CITY-ST-ZIP	GIBSONTON FL	
TITLE	V	DELETE
NAME	HAYNES, DONALD	
STREET ADDRESS	6714 NORTH WILLOW	
CITY-ST-ZIP	TAMPA FL	
TITLE	S	DELETE
NAME	KNIGHT, DIANE	
STREET ADDRESS	9907 RIVER DRIVE	
CITY-ST-ZIP	GIBSONTON FL 33534	
TITLE	T	DELETE
NAME	KNIGHT, EVELYN	
STREET ADDRESS	11001 RIVERVIEW DRIVE	
CITY-ST-ZIP	RIVERVIEW FL 33569	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/97 (813) 248-3877
Date Daytime Phone #

CR2E034 (9/96)