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NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 766337

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KNIGHT BOOSTERS, INC.

## FILED Apr 02 1998 8:00am Secretary of State

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SLOAN, STEVE 6088 MASTERS BLVD ORLANDO FL 32819  11. Pursuent to the provisions of Sections 617.0502 and 617.1508, 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 eccept the appointment as registered agent in membral with, and except the obligations of, Section 617.0503, Plorida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILE  PAD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. Name  PAD  SIGNATURE  PAD  SIGNATURE  PAD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. Name  SIGNATURE  PAD  SIGNATURE  PAD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. Name  SIGNATURE  PAD  SIGNATURE  PAD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. Name  12. Name  SIGNATURE  PAD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. TITLE  PAD  ORLANDO FL 32819  DELETE  14. TITLE  DELETE  21. TITLE  DELETE  33. SERET ADDRESS  CITY-51-72P  TITLE  DELETE  54. TITLE  DELETE  55. TITLE  DELETE  56. TITLE  DELETE	_ `	<b>—</b>			` <b> </b> `			ı		
SLOAN, STEVE 6088 MASTERS BLVD ORLANDO FL 32819  11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered segment. I emit familiar with, and accept the obligations of, Section 617 0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered segment. I emit familiar with, and accept the obligations of, Section 617 0503, Florida Statutes.  SIGNATURE  SQUILLY, typed or privad name of inguisered sigms and the approach. (NOTE Registered Statutes).  12. OFFICERS AND DIRECTORS  13. MARCH REGISTRAND AND STATE SULVD.  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  13. STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. GITY-ST-2P.  15. TILE  10. DELETE  11. TILE  10. DELETE  13. TILE  10. DELETE  14. TILE  22. NAME  34. STRET ADDRESS  071-ST-2P.  14. STATE  15. ST	24]									
SLOAN, STEVE 6088 MASTERS BLVD ORLANDO FL 32819  40 City FL 85 Zip Code 41. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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 and accept the challenge of Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS in 12.  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS in 12.  14. OFFICERS AND DIRECTORS 13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS in 12.  15. Water 12. Water	_	y, reame a	no Address of Com	eni riegi	istered Agent		91	Namo		
6088 MASTERS BLVD ORLANDO FL 32819  84										
## City ## Decided Sections 617.0502 and 617.1508, 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, 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, or both, in the State of Florida Statutes.  ### STORY OF IT IN TABLE   DATE							82	- Street A	itreet Address (P.O. Box Number is Not Acceptable)	
1. Pursuent to the provisions of Sections 617.0502 and 617.1508. Fiorida 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 Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE    Signatrue							83			
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-animed corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  SIGNATURE  PAD  OFFICERS AND DIRECTORS  STREET ADDRESS  GOOR MASTERS BLVD.  ORLANDO FL 32819  TILE  TD  ORLANDO FL 32819  DELETE  11. TILE  SIGNATURE  SIENT ADDRESS  ORLANDO FL 32822  12. NAME  STREET ADDRESS  ORLANDO FL 32822  14. CITY-ST-2P  ORLANDO FL 32816-0015  TILE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  PAD  ORLANDO FL 32816-0015  TILE  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  PAD  ORLANDO FL 32818-0015  TILE  SIGNATURE  SIGNATURE  TO  ORLANDO FL 32818-0015  TILE  SIGNATURE  SIGNATU							84	City	85 Zip Code	
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14. Thereby 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		ertify that the	Information supplied	with this	filing does not qualify f				ed in Section 119 07/3Vi). 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 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

**SIGNATURE:** 

3-19-90