

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002560

FILED
Aug 25, 2006
Secretary of State

Entity Name: KNIGHT FACILITIES MANAGEMENT, INC.

Current Principal Place of Business:

549 WEST RANDOLPH STREET, SUITE 701
CHICAGO, IL 60661

New Principal Place of Business:

Current Mailing Address:

549 WEST RANDOLPH STREET, SUITE 701
CHICAGO, IL 60661

New Mailing Address:

FEI Number: 36-3706416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: DAVIS, DEFOREST P
Address: 439 N. CANAL
City-St-Zip: CHICAGO, IL 60610

Title: D () Delete
Name: MITCHELL, STEPHEN C
Address: 121 W. DELAWARE
City-St-Zip: CHICAGO, IL 60661

Title: PCEO () Delete
Name: TREZEK, THOMAS J
Address: P.O. BOX 6214
City-St-Zip: SAGINAW, MI 48608

Title: VCFO (X) Delete
Name: RYAN, RAYMOND J JR.
Address: 304 S. NIAGARA
City-St-Zip: SAGINAW, MI 48602

Title: T () Delete
Name: ARGYLE, DENNIS J
Address: 7803 TEABERRY DR.
City-St-Zip: FREELAND, MI 48623

Title: S () Delete
Name: FRASER, MARGARET A
Address: 476 RAINTREE COURT
City-St-Zip: GLEN ELLYN, IL 60137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 Statutes. 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: MARGARET A. FRASER

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08/25/2006

Electronic Signature of Signing Officer or Director

Date