

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 9:56

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # G74192 (7)

1. Corporation Name

KNIGHT FINANCIAL PLANNING SERVICES, INC.

Principal Place of Business

**7301 NW 4TH ST
SUITE #100
PLANTATION FL 33317**

Mailing Address

**7301 NW 4TH ST
SUITE #100
PLANTATION FL 33317**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

12/12/1983

3a. Date of Last Report

03/31/1994

4. FEI Number

59-2419327

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. 100.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KNIGHT, EDWARD G.
7301 NW 4TH ST
SUITE #105
PLANTATION FL 33317**

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 the # of applications

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DP

NAME

KNIGHT, EDWARD G

STREET ADDRESS

7301 N.W. 4TH ST. #105

CITY - ST - ZIP

PLANTATION, FL 00000

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

DVS

NAME

KNIGHT, GAIL M

STREET ADDRESS

7301 N.W. 4TH ST. #105

CITY - ST - ZIP

PLANTATION, FL 00000

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

DIRECTOR, SECTY., TREAS.

☒ Change ☐ Addition

TITLE

ST

NAME

BERGERON, MILDRED J

STREET ADDRESS

7301 N.W. 4TH ST. #105

CITY - ST - ZIP

PLANTATION, FL 00000

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

REMOVE FROM YOUR RECORDS

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with the filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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, unchanged, or on an attachment with an addendum.

SIGNATURE:

Edward G. Knight
EDWARD G. KNIGHT
Signature and Typed or Printed Name of Signing Officer or Director

4/28/91 (305) 584-9090
Date Signature