

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J74417

FILED
Jan 04, 2007
Secretary of State

Entity Name: KNOWLES VIDEO, INCORPORATED

Current Principal Place of Business:

1180-B APALACHEE PKWY
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

2003 APALACHEE PKWY
SUITE 201
TALLAHASSEE, FL 32301 US

Current Mailing Address:

P.O. BOX 12127
TALLAHASSEE, FL 323172127 US

New Mailing Address:

FEI Number: 59-2831887 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNOWLES, KARL
457 WHITE DR.
C-2
TALLAHASSEE, FL 32304 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: DP () Delete
Name: KNOWLES, KARL
Address: 457 WHITE DR., #C-2
City-St-Zip: TALLAHASSEE, FL

Title: VD () Delete
Name: KATHE, JOHN
Address: 9839 NE 13TH AVE.
City-St-Zip: MIAMI, FL

Title: DST (X) Delete
Name: KATHE, GUY
Address: 101 HITCHING POST LN
City-St-Zip: GREENVILLE, SC 29615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DST (X) Change () Addition
Name: KATHE, GUY
Address: 101 HITCHING POST LN
City-St-Zip: GREENVILLE, SC 29615

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: KARL KNOWLES

DP

01/04/2007

Electronic Signature of Signing Officer or Director

Date