## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 14 1997 8:00am

Date

Daytime Phone #

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997		DIVISION OF	CORPORA		NS	Secretary of State			
	MENT # KOO601 . KNIGHT & SON, INC.	l (0)	(0)						
Principal Place of Business 1802 GARDEN COURT STUART FL 34998		Mailing Address 1802 GARDEN COURT STUART FL 34998-4050							
						<ol> <li>Date Incorporated or Qualified</li> <li>11/05/1987</li> </ol>	3a. Date of Last 01/30/1996	· · · · · · · · · · · · · · · · · · ·	
2. Principal Fi	ace of Business	2a. Mailing Address 26				4. FEI Number 65-0014935	<del></del>	Applied For Vot Applicable	
Suite, Apl	#, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired	1 1 7	Additional	
City & State		City & State				6. Election Campaign Financing		Required  May Be	
23		28	,			Trust Fund Contribution		d to Fees	
Zip	Country	Zip <b>29</b>	30 Cou	ntry		8. This corporation has liability for Florida Statutes	intangible tax under ₹Yes ☐ No	s. 199.032,	
24	25   9. Name and Address of Currer		[30]			10. Name and Address of New Re			
578	vert, stephen B. S.E. Palm Beach Road Art Fl 34994				Street Add	ress (P.O. Box Number is Not Acceptable)  FL 85 Zip Code			
office or ragent. La. SIGNATURE	m familiar with, and accept the oblig	gations of, Section 607.0505, F	lorida Stat	tutes		ation's board of directors. I hereby acception and the second of directors. I hereby acception and the second of t	DATE		
TITLE	· · ·		1170	1 1 TITLE			Change	Addition	
NAME STREET ADDRESS City - St - Zip	KNIGHT, LARRY L. 1802 GARDEN COURT STUART FL			1.2 NAME 1.3 STREET ADDRESS 1.4 CHY+ST-ZIP					
TITLE			2171		1-211	171.7	Change	Addition	
NAME STREET ADDRESS	KNIGHT, ELLA JEAN 1802 GARDEN COURT	1		2 2 NAME 2 3 STREET ADDRESS					
CITY - ST - ZIP	STUART FL	☐ DELETE	2 4 C 3 1 TI		1-ZIP		Change	Addition	
TITLE NAME				AME			Unange	Augunon .	
STREET ADDRESS			335	TREET	ADDRESS				
CITY - ST - ZIP			3 <b>4</b> , 0	OTY-S	ST-ZIP				
TITLE		☐ DELETE	4 1 11				[_] Change	Addition	
NAME			4 2 N						
STREET ADDRESS			•		ADDRESS T-ZIP				
CITY - ST - ZIP TO LE		☐ DELETÉ	5 1 TI		1 - 21		Change	Addition	
NAME			5 2 N	AME	Ì				
STREET ADDRESS			538	TREET	ADDRESS				
CITY-S1-712			5.4 C	5.4 C(TY - ST - ZIP					
TITLE		☐ DELETE	6.1 1	6.1 TITLE		-	Change	e Addition	
NAME			6.2 N						
STREET ADDRESS					ADDRESS			'	
14. 1 do here!	SE-7/P 6.4  I do hereby certify that the information supplied with this filing does not qualify for the				T-ZIP   mption_state	ed in Section 119 07(3)(i) Florida Statute	s. I further certify th	at the	
informatio	on indicated on this annual report or	supplemental annual report is	true and a	accu	irate and tha	at my signature shall have the same legators as required by Chapter 607, Florida s	al effect as if made i	under oath; that	