

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90116 022 ***150.00

DOCUMENT # **145890**
Entity Name
DENNIS KNAUER & SONS INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4008 GREENMARK LN.
Suite, Apt. #, etc.

3. Mailing Address
4008 GREENMARK LN.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
VALRICO, FL.
Zip
33594
Country
US

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4. FEI Number
62-1427526
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
BRACHA ROLLINS
Street Address (P.O. Box Number is Not Acceptable)
4008 GREENMARK LN.
City
VALRICO FL Zip Code
33594

8. 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	Pres. DENNIS W. KNAUER 4008 GREENMARK LN. VALRICO, FL. 33594
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IN THIS SPACE**

13. I hereby 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 indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Dennis W. Knauer** **DENNIS W. KNAUER** 4-17-02 813-230-4109
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2ED034B (12/01)