

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L77550

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** BLACK KNIGHT ENTERPRISE, INC.

**Current Principal Place of Business:**

315 12TH AVE.  
INDIAN ROCKS BEACH, FL 33785 US

**New Principal Place of Business:**

**Current Mailing Address:**

315 12TH AVE.  
INDIAN ROCKS BEACH, FL 33785

**New Mailing Address:**

**FEI Number:** 59-3012427

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHWAB, RANDY L  
315 12TH AVENUE  
INDIAN ROCKS BEACH, FL 33785 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: SCHWAB, RANDY  
Address: 315 12TH AVE.  
City-St-Zip: INDIAN ROCKS BCH, FL 33785

Title: VP  
Name: SCHWAB, VIRGINIA M MRS  
Address: 312 12TH AVENUE  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: SECY  
Name: SCHWAB, DEBORAH J MRS  
Address: 14804 SUNSET DRIVE  
City-St-Zip: LARGO, FL 33774

Title: TRES  
Name: SCHWAB, VIRGINIA M MRS  
Address: 315 12TH AVENUE  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH J SCHWAB

SECY

03/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date