## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000005346

2902 SPING HAMMOCK LANE

PLANT CITY, FL 33567

Address:

City-St-Zip:

FILED Apr 19, 2004 Secretary of State

Entity Name: KNIGHTS BASEBALL CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 2730 TREYMORE DRIVE ORLANDO, FL 32825 **Current Mailing Address: New Mailing Address:** 2730 TREYMORE DRIVE ORLANDO, FL 32825 FEI Number: 33-1015958 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RIDDLE, WILLIAM J IV 2730 TREYMORE DRIVE ORANDO, FL 32825 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition RIDDLE, WILLIAM J IV Name: Name: Address: 2730 TREYMORE DRIVE Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: RIDDLE, KATHRYN Name: Address: 2730 TREYMORE DRIVE Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: () Delete Title: () Change () Addition RIDDLE, WILLIAM J Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: KATHRYN D RIDDLE VD 04/19/2004