

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000009139

1. Entity Name
MATTHEW A. KNIGHT FOUNDATION, INC.



Principal Place of Business
12902 US 301 S
RIVERVIEW, FL 33569

Mailing Address
12902 US 301 S
RIVERVIEW, FL 33569



01112006 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0494455

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, H. STRATTON III
611 W AZALEE ST
TAMPA, FL 33606

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Sandra A. Knight Director

3-1-2006

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|-----------------------|
| TITLE | D |
| NAME | KNIGHT, RON |
| STREET ADDRESS | 12902 US 301 S |
| CITY-ST-ZIP | RIVERVIEW, FL 33569 |
| TITLE | D |
| NAME | KNIGHT, SANDRA A |
| STREET ADDRESS | 12902 US 301 S |
| CITY-ST-ZIP | RIVERVIEW, FL 33569 |
| TITLE | D |
| NAME | GRIFFIN, S. CATHERINE |
| STREET ADDRESS | 841 HARVEST GLEN |
| CITY-ST-ZIP | PLANO, TX 75023 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

U00000455805
03/16/06-80004-003 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sandra A. Knight

3-1-2006

813 642 9571

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Sandra A. Knight