

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009907

FILED  
Jan 05, 2012  
Secretary of State

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

**Current Principal Place of Business:**

11390 NORTH JOG ROAD  
SUITE 100  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

2000 PGA BLVD.  
SUITE 4450  
PALM BEACH GARDENS, FL 33408

**Current Mailing Address:**

11390 NORTH JOG ROAD  
SUITE 100  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

2000 PGA BLVD.  
SUITE 4450  
PALM BEACH GARDENS, FL 33408

**FEI Number:** 54-2136306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PLAYER, MARC B  
11390 NORTH JOG ROAD  
SUITE 100  
WEST PALM BEACH, FL 33418 US

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

PLAYER, MARC B  
2000 PGA BLVD.  
SUITE 4450  
WEST PALM BEACH, FL 33408 US

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:

01/05/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PLAYER, MARC B  
Address: 2000 PGA BLVD. SUITE 4450  
City-St-Zip: PALM BEACH GARDENS, FL 33408

Title: ST  
Name: POKORNY, JAMES R  
Address: 8401 CHAGRIN ROAD SUITE 16  
City-St-Zip: CHAGRIN FALLS, OH 44003

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARC B. PLAYER

PRES

01/05/2012

Electronic Signature of Signing Officer or Director

Date