FILED Apr 18, 2007 8:00 am Secretary of State 04-02-2007 90055 045 ****61.25

200	/ NOT-FOR-PROFIT CORPO	RATION
	ANNUAL REPORT	•

1. Entity Nam THE VEN	MENT # N28480 ERABLE ORDER OF KNIGH CHANGEL, INC.	ITS OF MICHAEL			04-02-200	, , , , , , , , , , , , , , , , , , , ,	3 01.23
Principal Place 6350 HORIZO TITUSVILLE, I	ON DR.	Mailing Address 6350 HORIZON DR. TITUSVILLE, FL 32780			MINIMANANANANANANANANANANANANANANANANANA		OTAN OFFINIST DI FREI
DO NOT WRITE IN THIS SPACE		CF	02122007 No Chg-NP CR2E037 (4/06)				
		11 11 11 10 O1 A		4. FEI Numb 59-259 5. Certificate			Applied For Not Applicable 5 Additional
	6. Name and Address of Current Re	oristand Agent	ı 	1		Fee P	lequired
6350 HOR	DD, DEBRA K			_	NOT WI	_	
8. The above the obligati	named entity submits this statement for tions of registered agent.	he purpose of changing its register	ed office or register	red agent, or bo	th, in the State of Flor	ida. I am familia	r with, and accept
SIGNATURE_	, (4)						
	Signature, typed or printed name of registered agent and	title it applicable. (NOTE: Registere	d Agent signature required	(when renatating		DATE	
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Final Trust Fund Contribution.		.00 May Be led to Fees			
10.	OFFICERS AND D	RECTORS					
THTLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHEPHERD, DONNA 6350 HORIZON DR.						
TITUSVILLE, FL 32780 TITLE TD MAME CHITWOOD, DEBBIE 6350 HORIZON DR. TITUSVILLE, FL 32780							
TITLE NAME STREET ADDRESS CITY-ST-ZEP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS							

12. Thereby certify that the information supplied with this Illing 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.

	J V
SIGNATURE:	1) elna

4.12-07

321-264-0911