

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34224

FILED  
Mar 16, 2009  
Secretary of State

Entity Name: KNOWLEDGE, INCORPORATED

## Current Principal Place of Business:

1384 54 AVE NE  
SAINT PETERSBURG, FL 33703

## New Principal Place of Business:

1384 54 AVE NE  
SAINT PETERSBURG, FL 33703 US

## Current Mailing Address:

1384 54 AVE NE  
SAINT PETERSBURG, FL 33703

## New Mailing Address:

PO BOX 55368  
SAINT PETERSBURG, FL 33732 US

FEI Number: 65-0150387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WINEBRENNER, JACK M.  
1384 54TH AVENUE NE  
ST. PETERSBURG, FL 33713 US

## Name and Address of New Registered Agent:

WINEBRENNER, JACK M  
1384 54TH AVENUE NE  
ST. PETERSBURG, FL 33713 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: JM WINEBRENNER

03/16/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WINEBRENNER, JACK M.,  
Address: 1384 54TH AVE. NE  
City-St-Zip: ST. PETERSBURG, FL

Title: SD ( ) Delete  
Name: WINEBRENNER, LAWRENC, E M.  
Address: 5431 NW 167TH ST  
City-St-Zip: OPA LOCKA, FL

Title: TD ( ) Delete  
Name: WINEBRENNER, WENDY,  
Address: 1384 54TH AVE NE  
City-St-Zip: ST PETERSBURG, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WINEBRENNER, JACK M  
Address: 1384 54TH AVE. NE  
City-St-Zip: ST. PETERSBURG, FL

Title: SD (X) Change ( ) Addition  
Name: WINEBRENNER, LAWRENCE M  
Address: 5431 NW 167TH ST  
City-St-Zip: OPA LOCKA, FL 33055 US

Title: TD (X) Change ( ) Addition  
Name: WINEBRENNER, WENDY D  
Address: 1384 54TH AVE NE  
City-St-Zip: ST PETERSBURG, FL 33703 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

SIGNATURE: JACK WINEBRENNER

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date