

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41975

FILED  
Jan 16, 2008  
Secretary of State

**Entity Name:** KNOTT'S RIVERFOREST FOUNDATION, INCORPORATED

**Current Principal Place of Business:**

36 63RD ST  
YANKEETOWN, FL 34498 US

**New Principal Place of Business:**

**Current Mailing Address:**

BOX 41  
YANKEETOWN, FL 34498 US

**New Mailing Address:**

**FEI Number:** 59-3049026

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORE, MARK  
4721 RIVERSIDE DR  
YANKEETOWN, FL 34498 US

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

MOORE, MARK  
15 CAPTAINS COVE RD  
INGLIS, FL 34449 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:

01/16/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: COX, WILLIAM R  
Address: 36 63RD STREET  
City-St-Zip: YANKEETOWN, FL 34498

Title: DS ( ) Delete  
Name: MOORE, MARK L  
Address: 4721 RIVERSIDE #9  
City-St-Zip: YANKEETOWN, FL 34498

Title: DT ( ) Delete  
Name: BERKLEY, ELEANOR  
Address: 4645 PAMALA ST  
City-St-Zip: YANKEETOWN, FL 34498

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: MOORE, MARK L  
Address: 15 CAPTAINS COVE RD  
City-St-Zip: INGLIS, FL 34449

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARK MOORE

DS

01/16/2008

Electronic Signature of Signing Officer or Director

Date