2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001575

City-St-Zip: PT CHARLOTTE, FL 33948

FILED Feb 23, 2007 Secretary of State

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Entity Nar	ne: THE HIST	ORICAL KNIGHT'S BUILDI	NG INC.			
Current Principal Place of Business:				New Principal Place of Business:		
P.O. BOX (PORT CH/	494239 ARLOTTE, FL	33949		DURANT STREE T CHARLOTTE, FI		
Current Mailing Address:				New Mailing Address:		
P.O. BOX (PORT CH/	494239 ARLOTTE, FL	33949				
FEI Number:	65-0575130	FEI Number Applied For ()	FEI Number No	ot Applicable ()	Certificate of Status Desired	(X)
Name and	Address of C	urrent Registered Agent:	Nam	e and Address of	New Registered Agent:	
4040 DUR	R, EUGENE RANT STREET ARLOTTE, FL	33948 US				
	named entity s of Florida.	submits this statement for the	e purpose of chan	ging its registered	office or registered agent, o	r both,
SIGNATUF	RE:					
	Electron	ic Signature of Registered A	gent		Date	
OFFICERS	S AND DIRECT	TORS:	ADD	ITIONS/CHANGE:	S TO OFFICERS AND DIR	ECTORS:
Title: Name: Address: City-St-Zip:	PSD () PLUMMER, EUG 4040 DURANT S PORT CHARLO	STREET	Title: Name: Addre: City-S	: ss:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VTD () PARAGEIS, HEI 111 REVERE ST PORT CHARLOT	TREET	Title: Name: Addre: City-S	: ss:) Change ()Addition	
Title: Name: Address:	D () DUNCAN, GRAC 950 WEBSTER		Title: Name: Addres) Change () Addition	

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

City-St-Zip:

SIGNATURE: EUGENE PLUMMER P 02/23/2007