

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State
 05-10-2001 90113 031 ***150.00

DOCUMENT # P00000025117

1. Entity Name

KNIGHT TURNER BOOKSTORES, INC.

Principal Place of Business

1603 ASBURY WAY
 BOYNTON BEACH FL 33426

Mailing Address

1603 ASBURY WAY
 BOYNTON BEACH FL 33426

2. Principal Place of Business

1885 W. Wedbright Road
 Suite, Apt. #, etc.

3. Mailing Address

1885 W. Wedbright Road
 Suite, Apt. #, etc.

City & State

Boynton Beach, FL

City & State

Boynton Beach, FL

4. FEI Number

65-0995091

Applied For

Not Applicable

Zip

33426 Palm Beach

Zip

33426 Palm Beach

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FORD, LIZZIE
 7331 NORTH MIAMI AVE.
 MIAMI FL 33150

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Joseph D. Knight, President

04/25/2001

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	PEAZANT, RACQUEL	
STREET ADDRESS	9115 N.W. 13TH AVENUE	
CITY-ST-ZIP	MIAMI FL 33147	
TITLE	President	<input type="checkbox"/> Delete
NAME	Knight, Joseph	
STREET ADDRESS	14898 Fairwind Ln	
CITY-ST-ZIP	Delray Beach, FL 33426	
TITLE	vice President	<input type="checkbox"/> Delete
NAME	Knight, Nedie	
STREET ADDRESS	14898 Fairwind Ln	
CITY-ST-ZIP	Delray Beach, FL 33426	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Joseph D. Knight, President

4/25/2001

561-738-2177

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)