## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000047479

Address:

City-St-Zip:

Entity Name: MICHAEL G. KNETTEL & CO., INC.

FILED Jun 03, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5100 28TH AVENUE SOUTH GULFPORT, FL 33707 **Current Mailing Address: New Mailing Address:** PO BOX 13926 ST. PETERSBURG, FL 33733 FEI Number: 59-3644020 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KNETTEL, MICHAEL G SR 5100 28TH AVENUE SOUTH GULFPORT, FL 33707 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition Name: KNETTEL, MICHAEL G Name: 5100 28TH AVENUE SOUTH Address: Address: City-St-Zip: GULFPORT, FL 33707 City-St-Zip: Title: Title: CEOS () Delete (X) Change ( ) Addition KNETTEL, KATHRYN M DINARDO, MICHAEL Name: Name: 5100 28TH AVENUE SOUTH 5100 28TH AVENUE SOUTH Address: Address: GULFPORT, FL 33707 GULFPORT, FL 33707 City-St-Zip: City-St-Zip: Title: Title: **TRES** ( ) Delete ( ) Change (X) Addition STAPLETON, ROBERTA S Name: Name: 5100 28TH AVENUE SOUTH Address Address: City-St-Zip: City-St-Zip: GULFPORT, FL 33707 Title: () Delete Title: VΡ ( ) Change (X) Addition LEE, PATRICIA M ESQ. Name: Name:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

5100 28TH AVENUE SOUTH

GULFPORT, FL 33707

SIGNATURE: MICHAEL G. KNETTEL **PRES** 06/03/2008