

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000043467

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Entity Name:** THE PALMER KNIGHT COMPANY

**Current Principal Place of Business:**

1022 PARK ST  
SUITE 402  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

1022 PARK ST  
SUITE 402  
JACKSONVILLE, FL 32204

**New Mailing Address:**

**FEI Number:** 59-3714649

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KNIGHT, A. PALMER  
1022 PARK ST  
SUITE 402  
JACKSONVILLE, FL 32204 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** CHM  
**Name:** KNIGHT, A. PALMER  
**Address:** 1022 PARK ST, STE 402  
**City-St-Zip:** JACKSONVILLE, FL 32204

**Title:** D  
**Name:** KNIGHT, MARIA B  
**Address:** 2970 ST JOHNS AVENUE SUITE 8A  
**City-St-Zip:** JACKSONVILLE, FL 32205

**Title:** PTD  
**Name:** KNIGHT, C. DAVIS  
**Address:** 1022 PARK ST, STE 402  
**City-St-Zip:** JACKSONVILLE, FL 32204

I hereby 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 all other like empowered.

**SIGNATURE:** C. DAVIS KNIGHT

PRES

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date