

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000042376

Entity Name: KNP LIMITED CORP

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

2801 BENT LEAF DRIVE
VALRICO, FL 33594

New Principal Place of Business:

1930 US HWY 41 SOUTH
RUSKIN, FL 33570

Current Mailing Address:

2801 BENT LEAF DRIVE
VALRICO, FL 33594

New Mailing Address:

1930 US HWY 41 SOUTH
RUSKIN, FL 33570

FEI Number: 20-8759585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN, ROY P
2801 BENT LEAF DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

THOMAS, TOMY
2801 BENT LEAF DRIVE
VALRICO, FL 33594 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: TOMY THOMAS

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS, TOMY
Address: 2801 BENT LEAF DRIVE
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: JOHN, MATHEW
Address: 2801 BENT LEAF DRIVE
City-St-Zip: VALRICO, FL 33594

Title: S () Delete
Name: JOHN, ROY P
Address: 2801 BENT LEAF DRIVE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: JOHN, MATHEW
Address: 2505 REGAL RIVER RD
City-St-Zip: VALRICO, FL 33594

Title: S (X) Change () Addition
Name: JOHN, ROY P
Address: 2849 LAKE MICHELA BLVD
City-St-Zip: VALRICO, FL 33594

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.

SIGNATURE: TOMY THOMAS

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date