## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P09000054717

Entity Name: KNOX INSURANCE NETWORK INC.

FILED Apr 19, 2010 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

1578 US HWY 1 SOUTH ST AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

1578 US HWY 1 SOUTH ST AUGUSTINE, FL 32084

FEI Number: 27-0324801 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:

KNOX, JAMES S 1578 US HWY 1 SOUTH ST AUGUSTINE, FL 32084 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PST

 Name:
 KNOX, JAMES S

 Address:
 1578 US HWY 1 SOUTH

 City-St-Zip:
 ST AUGUSTINE, FL 32084

Title: VP,

 Name:
 KNOX, NANCY W

 Address:
 1578 US HWY 1 SOUTH

 City-St-Zip:
 ST AUGUSTINE, FL 32084

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: JAMES KNOX PRES 04/19/2010