

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32085

FILED  
May 08, 2006  
Secretary of State

Entity Name: KNOWLES AND KNOWLES, INC.

**Current Principal Place of Business:**

1100 BARNETT DRIVE  
SUITE #49  
LAKE WORTH, FL 33461 US

**New Principal Place of Business:**

P.O. BOX 540164  
LAKE WORTH, FL 33454-016 US

**Current Mailing Address:**

P.O. BOX 540164  
LAKE WORTH, FL 334540164 US

**New Mailing Address:**

FEI Number: 65-0221388      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KNOWLES, LAVERIA  
5676 LAKE SHORE VILLAGE CIRCLE  
LAKE WORTH, FL 33463 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: KNOWLES, LAVERIA,  
Address: 5676 LAKE SHORE VILLAGE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DIR ( ) Change (X) Addition  
Name: KNOWLES, MELVIN R  
Address: 5264 NW 24TH AVENUE  
City-St-Zip: MIAMI, FL 33142

Title: DIR ( ) Change (X) Addition  
Name: FREDERICK, ARETINA  
Address: 4811 CHERRY ROAD  
City-St-Zip: WEST PALM BEACH, FL 33417

I hereby certify that the information supplied with this filing does not qualify for the 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: LAVERIA KNOWLES

PRES

05/08/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date