## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000061175

1. Corporation Name

## **FILED** Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90102 036 \*\*\*150.00

KNIGHT	S AUTOMOTIVE, INC.					
Principal Place		Mailing Address				
5135 WEST FAIRFIELD DRIVE 5135 WEST FAIRFIELD DRIVE PENSACOLA FL 32506 PENSACOLA FL 32506					•	
PENSACULA FL	. 32306	PENDACOLA FL 32300		DO NOT WE	RITE IN THIS SPACE	
				3. Date Incorporated or Qualife	d	$\neg$
				08/07/1995		
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied F	or
21		26		59-3332261	Not Applic	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	S8.75 Addition	
22		27				1
City & State	e	City & State		Election Campaign Financing     Trust Fund Contribution	9 \$5.00 May Be Added to Fees	
Zip	Country		Country	8. This corporation owes the cu		<del>'—</del>
24	25	29 3	_	Personal Property Tax.	¥ Yes □No	
24	9. Name and Address of Curre		<u> </u>	10. Name and Address of New	Registered Agent	
			81 Name	2. 252 7 C		
,	, KIEVIT & KELLY, P.A.		82 Street A	ROBERT J. SMITH	stable)	$\dashv$
15 WEST MAIN STREET			3	Address (P.O. Box Number is Not Accept to CERVANYE	<u>5 57</u>	
PEN	SACOLA FL 32504		83			•
			84 City	0-11111	FL 85 Zip Code	~ /
		00 1 007 4500 Ft-side Ottobal	Abb - 10 manual -	PENSACONA  corporation submits this statement for the	e purpose of changing its registe	ered
office or n agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State im familiar with, and accept the oblig	oz and 607.1508, Florida Statutes e of Florida. Such change was auti ations of, Section 607.0505, Florid	horized by the corpo la Statutes.	ration's board of directors. I hereby acc	ept the appointment as registered	ď
SIGNATURE	1 Mm	<b>7</b> 5			-13-77	_
40	Signature, typed or printed name of registered ag		egistered Agent signature re		DATE DEFICERS AND DIRECTORS IN	12
12.	OFFICERS A	ND DIRECTORS	1.1 TITLE	PID		Addition
NAME	KNIGHT, GEORGE E		1.2 NAME			\
STREET ADDRESS	900 LANGLEY AVENUE		1.3 STREET ADDRESS			}
1	PENSACOLA FL 32504		1.4 CITY-ST-ZIP			
CITY-ST-ZIP	D	☐ DELETE	2.1 TITLE	VPIR	Change A	Addition
NAME	KNIGHT, MARIA B	<del>-</del>	2.2 NAME			
STREET ADDRESS	900 LANGLEY AVENUE		2.3 STREET ADDRESS			1
CITY-ST-ZIP	PENSACOLA FL 32504		2.4 CITY-ST-ZIP	•		·
TITLE	D	<b>▼</b> DELETE	3.1 TITLE		☐ Change ☐ A	Addition
NAME	KNIGHT, DAVE L		3.2 NAME			
STREET ADDRESS	7810 SALTILLO STREET		3.3 STREET ADDRESS		•	ľ
CITY-ST-ZIP	PENSACOLA FL 32562		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	Dianne E. Vieitez	_ , ,	Addition
NAME			4. 2 NAME	150 Holsberry Lane Pensacola, FL 32534	51T	}
STREET ADDRESS:			4.3 STREET ADDRESS	Pensacola, FL32534		
CITY-ST-ZIP			4.4 CITY- \$T- ZIP			
TITLE		☐ OELETE	5.1 TITLE		☐ Change ☐ A	Addition
NAME			5.2 NAME	•	•	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	}		5.4 CITY-ST-ZIP	•		)
						1 1 1147
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ A	Addition
TITLE NAME		DELETE .			☐ Change ☐ /	Addition

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: