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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000091140

KNIGHT FINANCIAL CORP.

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90010 003 ***158.75

Principal Place of Business Mailing Address 2808 TARFLOWER WAY 14100 DARNESTOWN ROAD NAPLES FL 33942 DARNSTOWN MD 20874 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 2. Principal Place of Business 11/30/1995 2a. Mailing Address 21 4. FEI Number Applied For Suite, Apt. #, etc. 65-0628322 Suite, Apt. #, etc. Not Applicable 22 5. Certificate of Status Desired \$8.75 Additional City & State City & State Fee Required 23 6. Election Campaign Financing 28 \$5.00 May Be Zip Trust Fund Contribution Zip Added to Fees Country 24 8. This corporation owes the current year Intangible 25 29 30 9. Name and Address of Current Registered Agent Personal Property Tax. □No 10. Name and Address of New Registered Agent HANLEY, C. ROBERT 81 2808 TARFLOWER WAY Street Address (P.O. Box Number is Not Acceptable) 82 NAPLES FL 33942 83 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE HANLEY, C. ROBERT Addition 12 NAME STREET ADDRESS 2808 TARFLOWER WAY 1.3 STREET ADDRESS CITY-ST-ZIP NAPLES FL 33942 TITLE 1.4 CITY-ST-ZIP ☐ DELETE 2.1 TITLE SUTHERLAND, MICHAEL T NAME ☐ Change Addition 2.2 NAME 17601 WHITESTORE RD. STREET ADDRESS 2.3 STREET ADDRESS BARNESVILLE MD 20838 CITY-ST-ZIP TITLE 2.4 CITY-ST-ZIP ☐ DELETE 3.1 TITLE HANLEY, DANIEL ☐ Change Addition 3.2 NAME STREET ADDRESS 11206 MIDVALE ROAD 3.3 STREET ADDRESS KENSINGTON MD 20895 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE BEACHAM, LINDA AME Change Addition 4. 2 NAME 14100 DARNESTOWN RD. TREET ADDRESS 4.3 STREET ADDRESS ITY-ST-ZIP DARNESTOWN MD 20874 TLE 4.4 CITY-ST-ZIP DELETE 5.1 TITLE ☐ Change ☐ Addition 5.2 NAME TREET ADDRESS 5.3 STREET ADDRESS TY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TAILE ME ☐ Change Addition 6.2 NAME REET ADDRESS 6.3 STREET ADDRESS

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 efficiency 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.

IGNATURE:

MICHAEL

CR2E034 (11/98)