FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

ORLANDO FL 32818

P9600000370 (2)

ORLANDO FL 32818

DOCUMENT # THE BRUCE R. KNOX CORPORATION



Principal Place of Business Maling Address 4349 N. HIAWASSEE ROAD 4349 N. HAWASSEE ROAD



3. Date Incorporated or Qualified 3a. Date of Last Report

 Z. Principal Pla 					12/29/1995												
21	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	1	Applied For									
	H oto	26						Not Applicable									
Suite Apt. #, etc.		Suite, Apt. #, etc.			5. Cert ficate of Status Desired		\$8.75 Additional										
City & State)	City & State			6. Election Campaign Financing			e Required									
3		28			Trust Fund Contribution			\$5.00 May Be Added to Fees									
— Zip	Country	Ζιμι	Country		8. This corporation has liability for it	ntaggibio ta	ux under	e 100.030									
24	25	29	30		Florida Statutes Yes	∏No	av mikies	s 199.032,									
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New R	egistered .	Agent										
4349 N. MAWASSEE RUAU				81 Name													
				82 Street Address (P.O. Box Number is Not Acceptable) 83													
												84	City			-T <u></u>	7 0 1
									11 D.	AL.		11	,		FL		Zip Code
or registere	o the provisions or Sections 607.0502 ad agent, or both, in the State of Florid	and 607,1508, Florida Statut	tes, the above n	anied corpora	ation submits this statement for the purp d of directors. Thereby accept the appo	ose of cha	nging its	registered office									
familiar with	1, and accept the obligations of, Secti	on 607.0505, Florida Statutes	гостоў шегсокрю S.	radon's Doan	u or orectors. Thereby accept the appo	intment as	registere	ed agent. Lam									
SIGNATURE _	STEACH STUDENTS																
12.	Signature, typical or provided name of registered agic in OFFICERS AND		To Regional Agent	South at a feet to the feet of the call		DATE											
ITLE	D	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECT	ORS IN 12									
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TREET ADDRESS	4349 N. HIAWASSEE ROAD		1.2 NAME														
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR