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May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000020190 (0)

1. Corporation Name
THE KNIGHT GROUP, INC.



Principal Place of Business
1221 7TH STREET SOUTH
SAFETY HARBOR FL 34695

Mailing Address
1221 7TH STREET SOUTH
SAFETY HARBOR FL 34695-4102

3. Date Incorporated or Qualified
03/05/1996

3a. Date of Last Report

2. Principal Place of Business

21 837 MAIN STREET

2a. Mailing Address

26 837 MAIN ST.

4. FEI Number

59 336 5732

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SAFETY HARBOR FL.

27

City & State

28 SAFETY HARBOR, FL

23 Zip 34695

Country

25 USA

29 Zip 34695

Country

30 U.S.A.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

LINDA CARRIERE

82 Street Address (P.O. Box Number is Not Acceptable)

83

1221 7th ST SOUTH

84 City

SAFETY HARBOR

FL

85 Zip Code

34695

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Linda Carriere

LINDA CARRIERE

4-22-97

Signature of principal or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVST ☒ DELETE
NAME KNIGHT, JEANNE D
STREET ADDRESS 1221 7TH STREET SOUTH
CITY-ST-ZIP SAFETY HARBOR FL 34695

TITLE D ☐ DELETE
NAME KNIGHT, JEANNE D
STREET ADDRESS 1221 7TH STREET SOUTH
CITY-ST-ZIP SAFETY HARBOR FL 34695

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Harrill, Justin
3761 Wingers Cir Apt 112
Palm Harbor, FL 34684

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
PST
KNIGHT JEANNE
1221 7th ST SOUTH
SAFETY HARBOR

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Linda Carriere
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-97

Date

813-797-8785

Daytime Phone #

CR2E034 (9/96)