
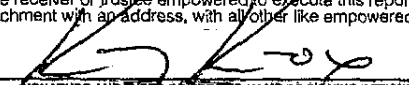


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # P96000087392 1. Entity Name TOUR GREENS BY KENNY KNOX, INC.		
Principal Place of Business 3813 DILLS RD. MONTICELLO, FL 32344 US	Mailing Address 3813 DILLS RD. MONTICELLO, FL 32344 US	
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent KNOX, KENNY 3813 DILLS RD. MONTICELLO, FL 32344		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KNOX, KENNY 3813 DILLS RD. MONTICELLO, FL 32344	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST KNOX, KAREN 3813 DILLS RD. MONTICELLO, FL 32344	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  Kenny Knox		4/14/05 850-251-0156 Date Daytime Phone



04102005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3409833	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

U000000308191
04/15/05-80085-011 150.00

**DO NOT WRITE
IN THIS SPACE**