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Jun 03 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 # P96000090694 (6)

1. Corporation Name
KNIGHT INDUSTRIES, INC.



Principal Place of Business
856 NORTH COCOA BLVD. #1119
COCOA FL 32922-7569

Mailing Address
856 NORTH COCOA BLVD. #1119
COCOA FL 32922-7569

3. Date Incorporated or Qualified
11/01/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

59-3410538

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GILES, J D
856 NORTH COCOA BLVD. #1119
COCOA FL 32922-7569

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME KNIGHT, DONALD R
STREET ADDRESS POST OFFICE BOX 1087
CITY-ST-ZIP PLYMOUTH FL 32768-1087

☐ DELETE

TITLE D
NAME KNIGHT, KATIE A
STREET ADDRESS POST OFFICE BOX 1087
CITY-ST-ZIP PLYMOUTH FL 32768-1087

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 1568 S. ELSASSER ST.

1.4 CITY-ST-ZIP DELAND, FL 32720

2.1 TITLE VSTD ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 1568 S. ELSASSER ST.

2.4 CITY-ST-ZIP DELAND, FL 32720

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME J. D. GILES

3.3 STREET ADDRESS 956 NORTH COCOA BLVD, SUITE 1119

3.4 CITY-ST-ZIP COCOA, FL 32922-7569

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 J. D. GILES 6/29/97

CR2E034 (9/96)