ANNUAL REPORT (AR)

DOCUMENT # P97000102917 1. Entity Name KNOX, INC.						FILED Feb 26, 2007 08:00 AM Secretary of State				
Principal Place of Business Mailing Addr PO BOX 11207 PO BOX 11 NAPLES FL 33941 NAPLES FL				· · · · · · · · · · · · · · · · · · ·	An Africa - Angula					
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt	. #, etc .	Suite, Apt. #, etc.			1st MOORE CR2E034 (10/06)					
City & Sta	lo	City & State				4. FEI Number 65-0812533 Applied For Not Applicable				
Zip	Country	Zip		Cour	etry	5. Certificat	e of Status Desired		\$8.75 Ac	iditional
	6. Name and Address of Current	Registere	d Agent		7. Name and Address of New Registered Agent					
	APIRO, MARC L ESQUIRE				Name					
SUI	28 CORPORATE SQUARE				Street Address (P.O. Box Number is Not Acceptable)					
NA	PLES FL 34104				City			FL	Zip Coo	 de
8. The above	a named ontity submits this statement for	or the purpo	ose of changing its	register	ad office or register	ed agont, or be	oth, in the State of FI		(
SIGNATURE										
	ILE NOW!!! FEE IS \$150.00	idda i eun cue		E Registore	of Agent signature required	when reinstating)		DATE		-
After	May 1, 2007 Fee Will Be \$550.00 k Payable to Florida Department o						9. Election Camp Trust Fund Cor	-		.00 May Be led to Fees
10.	OFFICERS AND	DIRECTOR	RS	11.		ADDITIÕÑS	CHANGES TO OFF	ICERS AND	DIRECTOR	RS IN 11
NAME SIREET ADDRESS CITY - ST - ZIP	PTDC KNOX, JR, DRAKE ALLAN P.O. BOX 11207 N/A NAPLES FL 33941				ſ	U09000647720 □ Change □ Addition 03/06/07-80083-013 150.00				
HILL NAME SIFEET ADDRESS CITY-ST ZIP	SD DRAKE, MARINA M P.O. BOX 11207 N/A NAPLES FL 33941		☐ Delete	•	,				☐ Change	Addilion
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12. I hereby of indicated of the cordif change	certify that the information supplied will on this report or supplemental reportion poration or the receiver of trustograms d, or on an attachment with an address	h this filing s true and a cowered to s, with all o	does not qualify to accurate and that n execute this report other like empower	or the ex ny signat t as requ ed.	emptions contained ure shall have the s ired by Chapter 60	d in Section 11 ame legal effe 7, Florida Statu	9, Florida Statutes. ct as if made under ites, and that my nar	I further certi oath; that I ar ne appoars i	fy that the n an office n Block 10	information r or director or Block 11

SIGNATURE AND APED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: