

ANNUAL REPORT

DOCUMENT # P98000069025

1. Entity Name
BLACK KNIGHT PRODUCTIONS, INC.



FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90022 049 ***150.00

Principal Place of Business
1470 JAMAICA RD
MARCO ISLAND, FL 34145 US

Mailing Address
1470 JAMAICA RD
MARCO ISLAND, FL 34145 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01072004 Chg-P CR2E034 (10/03)

4. FEI Number
65-0860695

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, MERLIN
1470 JAMAICA RD
MARCO ISLAND, FL 34145

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME MILLER, MERLIN L
STREET ADDRESS 1470 JAMAICA RD
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE ~~D~~ ☒ Delete
NAME ~~DORLAND, GILBERT N~~
STREET ADDRESS ~~4246 NORTH OCEAN DRIVE~~
CITY-ST-ZIP ~~HOLLYWOOD, FL 33019~~

TITLE D ☐ Delete
NAME DRAPER, JOHN M
STREET ADDRESS 1240 N-SHERIDAN RD
CITY-ST-ZIP LAKE FOREST, IL 60045

TITLE D ☐ Delete
NAME ROZZONI, RENARD R
STREET ADDRESS 9275 SAN DIEGO NE
CITY-ST-ZIP ALBUQUERQUE, NM 87122

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition
NAME JUDGE, THOMAS C.
STREET ADDRESS 544 GREENWOOD RD
CITY-ST-ZIP NORTHBROOK, IL 60062

TITLE D ☐ Change ☒ Addition
NAME FOOTE, ASHBY M, III
STREET ADDRESS 4714 CALNITA PL
CITY-ST-ZIP JACKSON, MS 39211

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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:

Merlin Miller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 7, 04

Date

239-393-0839

Daytime Phone #