

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**

03-12-2001 90443 026 \*\*\*150.00

**DOCUMENT # S40094**

1. Entity Name

**KNIGHT GENERAL AVIATION, INC.**

Principal Place of Business

8600 E. PEACE VALLEY LANE  
 FLORAL CITY FL 34436  
 US

Mailing Address

8600 E. PEACE VALLEY LANE  
 FLORAL CITY FL 34436  
 US

929675

2. Principal Place of Business

3. Mailing Address

7770 E. Pinto Court  
 Suite, Apt. #, etc.

7770 E. Pinto Court  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Floral City, Fla.

City & State

Floral City, Fla.

4. FEI Number

65-0253019

Applied For

Not Applicable

Zip

34436

Country

USA

Zip

34436

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALDERSON, PAMELA  
 8600 E. PEACE VALLEY LANE  
 FLORAL CITY FL 34436

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 DPT  
 ALDERSON, ANTHONY P.  
 8600 E. PEACE VALLEY LANE  
 FLORAL CITY FL ☐ Delete

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 VPS  
 ALDERSON, PAMELA  
 8600 E. PEACE VALLEY LANE  
 FLORAL CITY FL ☐ Delete

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

TITLE  
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☐ Delete

TITLE  
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☐ Delete

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 5, 2001

Date

Daytime Phone #

CR2E034 (10/00)