

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murpham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S60236** (4)
1. Corporation Name
KNEP INC.

Principal Place of Business
**401 W. CENTRAL BLVD.
ORLANDO FL 32801**

Mailing Address
**401 W. CENTRAL BLVD
ORLANDO FL 32801**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **06/17/1991** 3a. Date of last Report **09/23/1994**
4. FEI Number **59-3071772** Applied For Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21. State Apt. # etc 26. State Apt. # etc
22. City & State 27. City & State
23. City & State 28. City & State
24. City & State 25. City & State 29. City & State 30. City & State

9. Name and Address of Current Registered Agent

**MCKAY, DARLENE
401 W. CENTRAL BLVD.
ORLANDO FL 32801**

10. Name and Address of New Registered Agent

81. Name **Jordan, Edward P II**
82. Street Address (P.O. Box Number is Not Acceptable) **111 N. Orange Ave.**
83. Suite **1800**
84. City **Orlando** 85. Zip Code **FL 32801**

11. Pursuant to the provisions of Sections 607.01(2) 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 607.01(2), Florida Statutes.

SIGNATURE *EJ*

By the Registered Agent as the registered agent for the corporation

4/22/95
(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If 12)	
1. NAME P KNEPPER, JAMES 2. STREET ADDRESS 5208 SECLUDED OAKS DRIVE 3. CITY, ST. ZIP ORLANDO FL 32812		1. NAME 401 W. Central Blvd. 2. STREET ADDRESS Orlando, FL 32801	☒ Change ☐ Addition
4. NAME		3. NAME	☐ Change ☐ Addition
5. NAME		4. NAME	☐ Change ☐ Addition
6. NAME		5. NAME	☐ Change ☐ Addition
7. NAME		6. NAME	☐ Change ☐ Addition
8. NAME		7. NAME	☐ Change ☐ Addition
9. NAME		8. NAME	☐ Change ☐ Addition
10. NAME		9. NAME	☐ Change ☐ Addition
11. NAME		10. NAME	☐ Change ☐ Addition
12. NAME		11. NAME	☐ Change ☐ Addition
13. NAME		12. NAME	☐ Change ☐ Addition
14. NAME		13. NAME	☐ Change ☐ Addition
15. NAME		14. NAME	☐ Change ☐ Addition
16. NAME		15. NAME	☐ Change ☐ Addition
17. NAME		16. NAME	☐ Change ☐ Addition
18. NAME		17. NAME	☐ Change ☐ Addition
19. NAME		18. NAME	☐ Change ☐ Addition
20. NAME		19. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1 of Block 13 and changed, or my pre-attachment with an address.

SIGNATURE: *James Knepner* **James Knepner, President of Knep Inc.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/95 **407-423-3335**
(Date) (Telephone Number)