

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S62909

FILED
Apr 26, 2006
Secretary of State

Entity Name: JAMES D. KNOWLES, INC.

Current Principal Place of Business:

2000 N. STATE ROAD 7
LAUDERDALE LAKES, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

2000 N. STATE ROAD 7
LAUDERDALE LAKES, FL 33313 US

New Mailing Address:

FEI Number: 65-0275423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAXINE, KNOWLES C
2000 N. STATE ROAD 7
LAUDERDALE LAKES, FL 33313 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: MAXINE, KNOWLES C
Address: 700 E ATLANTIC BLVD #102
City-St-Zip: POMPANO BEACH, FL 33060

Title: T () Delete
Name: JAMES, KNOWLES D
Address: 700 E ATLANTIC BLVD #102
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: MAXINE, KNOWLES C
Address: 2000 N. STATE ROAD 7
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: T (X) Change () Addition
Name: JAMES, KNOWLES D
Address: 2000 N. STATE ROAD 7
City-St-Zip: LAUDERDALE LAKES, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAXINE KNOWLES

P

04/26/2006

Electronic Signature of Signing Officer or Director

_____ Date