

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 654347

Entity Name: JAMES W. KNIGHT ELECTRIC, INC.**Current Principal Place of Business:**425 SOUTH 50TH ST.
TAMPA, FL 33619**Current Mailing Address:**P.O. BOX 5992
TAMPA, FL 33675 US**FEI Number:** 59-2009529**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KNIGHT, JAMES W.
425 SOUTH 50TH ST.
TAMPA, FL 33619 US*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**Officer/Director Detail :**

Title	V
Name	KILBOURNE, KEVIN M
Address	4287 SIESTA ROAD
City-State-Zip:	BROOKSVILLE FL

Title	V
Name	HAYNES, DONALD
Address	6714 NORTH WILLOW
City-State-Zip:	TAMPA FL

Title	T
Name	KNIGHT, EVELYN
Address	800 W AZEELE ST APT 106
City-State-Zip:	TAMPA FL 33606

Title	P
Name	KNIGHT, JAMES W
Address	425 SOUTH 50TH ST.
City-State-Zip:	TAMPA FL 33619

Title	S
Name	KNIGHT, DIANE
Address	425 SOUTH 50TH ST.
City-State-Zip:	TAMPA FL 33619

Title	OTHER
Name	WENZEL, DAVID S
Address	1205 LADY GUINEVERE DR
City-State-Zip:	VALRICO FL 33594

I hereby 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 all other like empowered.

SIGNATURE: JAMES W KNIGHT**PRESIDENT****04/24/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date