

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2001 8:00 am
Secretary of State

0136375 AT

DOCUMENT # F00000000160

1. Entity Name
KNIGHT COACH, INC.



07-25-2001 90005 044 ***150.00

Principal Place of Business 4862 HWY 15 N. LAUREL MS 39443	Mailing Address 4862 HWY 15 N. LAUREL MS 39443
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 64-0872803	Applied For <input type="checkbox"/> Not Applicable
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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	
MOSS, MARVIN I 20801 BICAYNE BLVD. STE. 506 N. MIAMI FL 33180-1430		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 _____ (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) <input type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNIGHT, JAMES D 4862 HWY 15 N. LAUREL MS 39443	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KNIGHT, SHARON K 4862 HWY 15 N. LAUREL MS 39443	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE: *James D. Knight* **JAMES D. KNIGHT** 7-19-01 601 426 2777

CF2E034 (5/01)

Attachment
#F0000001000

KNIGHT COACH, INC.
4862 HWY. 15 N.
LAUREL, MS. 39443

C0074157

Laurel (601) 426-2777 Meridian (601) 485-0504 Fax (601) 649-5631

July 19, 2001

Florida Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

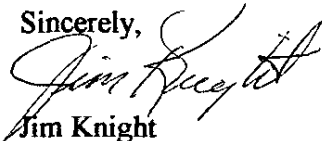
RE: 2001 Uniform Business Report

This letter is as per someone that I spoke with in your office on Tuesday July 17 about this. I received nothing from the State of Florida about renewing the uniform business report for 2001 until I received the enclosed form stating that this form served as my "60 days notice that your corporation will be administratively dissolved/revoked."

I was instructed to enclose this letter with the UBR form as well as a check for \$150.00, which should be the normal fee for renewal. I am formally requesting that the late filing fees be waived for this year since I did not receive the proper forms in time.

Please include me in the paperwork flow for next year so that I may file my report on a timely basis. I will also assume that this is all you need from me this year unless I hear otherwise.

Sincerely,



Jim Knight
Knight Coach, Inc.