

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**May 04, 1999 8:00 am**  
**Secretary of State**

05-04-1999 90017 004 \*\*\*150.00

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **F96000004240**

1. Corporation Name  
**KNB INCORPORATED**



Principal Place of Business Mailing Address  
**WHITLAND BUSINESS PARK** **WHITLAND BUSINESS PARK**  
**2400 S MICROAGE WAY** **2400 S MICROAGE WAY**  
**TEMPE AZ 85282** **TEMPE AZ 85282**  
**US** **US**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified  
**08/20/1996**

4. FEI Number  
**23-2505715**

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 owes the current year Intangible Personal Property Tax.  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. **MS #8**

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 **85282-1896** 29 **85282-1896** 30

9. Name and Address of Current Registered Agent

**CURRY, ROBERT S**  
**933 CLINTMOORE ROAD**  
**BOCA RATON FL 33487**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number/State Abbreviation)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE **SEE COMPLETE LISTING OF OFFICERS AND DIRECTORS** DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b> <input type="checkbox"/> DELETE
NAME	<b>JEFFREY M SWANSON</b>
STREET ADDRESS	<b>2400 S MICROAGE WAY</b>
CITY-ST-ZIP	<b>TEMPE AZ 85282</b>
TITLE	<b>VPAS</b> <input type="checkbox"/> DELETE
NAME	<b>JAMES H DOMAZ</b>
STREET ADDRESS	<b>2400 S MICROAGE WAY</b>
CITY-ST-ZIP	<b>TEMPE AZ 85282</b>
TITLE	<b>C</b> <input type="checkbox"/> DELETE
NAME	<b>JEFFREY D MCKEEVER</b>
STREET ADDRESS	<b>2400 S MICROAGE WAY</b>
CITY-ST-ZIP	<b>TEMPE AZ 85282</b>
TITLE	<del><b>D</b></del> <input checked="" type="checkbox"/> DELETE
NAME	<del><b>JOHN S LEWIS</b></del>
STREET ADDRESS	<del><b>2400 S MICROAGE WAY</b></del>
CITY-ST-ZIP	<del><b>TEMPE AZ 85282</b></del>
TITLE	<b>T</b> <input type="checkbox"/> DELETE
NAME	<b>JAMES R DANIEL</b>
STREET ADDRESS	<b>2400 S MICROAGE WAY</b>
CITY-ST-ZIP	<b>TEMPE AZ 85282</b>
TITLE	<b>AT</b> <input type="checkbox"/> DELETE
NAME	<b>RAYMOND L STORCK</b>
STREET ADDRESS	<b>2400 S MICROAGE WAY</b>
CITY-ST-ZIP	<b>TEMPE AZ 85282</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	<b>85282-1896</b>
2.1 TITLE	<b>Also Corporate Counsel</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	<b>85282-1896</b>
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	<b>85282-1896</b>
4.1 TITLE	<b>also Secretary</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	<b>85282-1896</b>
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	<b>85282-1896</b>
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	<b>85282-1896</b>

14. 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other live empowered

SIGNATURE: **JAMES H. DOMAZ, VP** Sec./Corp. Counsel **4-20-99** 602-366-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)

**KNB Incorporated**4755-91-90017-4  
F 96000004240

Office	Officers	Date Appointed
Chairman of the Board	Jeffrey D. McKeever	7/07/97
President	Jeffrey M. Swanson	7/07/97
Vice President – Sales	Linda C. Furse	7/07/97
Vice President – Administration	Alan R. Lyons	7/07/97
Treasurer	James R. Daniel	7/07/97
Vice President, Corporate Counsel and Assistant. Secretary	James H. Domaz	11/03/97
Assistant Treasurer	Raymond L. Storck	7/07/97