

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2010 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information		
For calendar plan year 2010 or fiscal plan year beginning <u>01/01/2010</u> and ending <u>12/31/2010</u>			
A This return/report is for:	☐ a multiemployer plan;	☐ a multiple-employer plan; or	
	☒ a single-employer plan;	☐ a DFE (specify) ____	
B This return/report is:	☐ the first return/report;	☐ the final return/report;	
	☐ an amended return/report;	☐ a short plan year return/report (less than 12 months).	
C If the plan is a collectively-bargained plan, check here.	☐		
D Check box if filing under:	☒ Form 5558;	☐ automatic extension;	☐ the DFVC program;
	☐ special extension (enter description)		

Part II	Basic Plan Information —enter all requested information		
1a Name of plan <u>KNIGHT ENTERPRISES 401(K) RETIREMENT & PROFIT SHARING PLAN</u>	1b Three-digit plan number (PN) ►	<u>001</u>	
	1c Effective date of plan	<u>07/01/1998</u>	
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>KNIGHT ENTERPRISES</u> <u>6056 ULMERTON ROAD</u> <u>CLEARWATER, FL 33760</u>	2b Employer Identification Number (EIN) <u>59-3100430</u>	2c Sponsor's telephone number <u>727-524-6235</u>	2d Business code (see instructions) <u>238900</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/16/2011</u>	<u>JEFFRY D. KNIGHT</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/16/2011</u>	<u>JEFFRY D. KNIGHT</u>
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2010)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") KNIGHT ENTERPRISES 6056 ULMERTON ROAD CLEARWATER, FL 33760	3b Administrator's EIN 59-3100430 3c Administrator's telephone number 727-524-6235
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	142
6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	137
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	4
d Subtotal. Add lines 6a , 6b , and 6c	6d	141
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	141
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	73
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	1
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2E 2J 2K 2T 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☐ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)
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SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2010 This Form is Open to Public Inspection
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For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010		
A Name of plan KNIGHT ENTERPRISES 401(K) RETIREMENT & PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500. KNIGHT ENTERPRISES	D Employer Identification Number (EIN) 59-3100430	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
JOHN HANCOCK LIFE INSURANCE COMPANY U.S.A.

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
01-0233346	65838	38461	74	01/01/2010	12/31/2010

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
3848	1900

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KOVACK SECURITIES, INC.
6451 N FEDERAL HIGHWAY #1201
FORT LAUDERDALE, FL 33308

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1506			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LPL FINANCIAL CORPORATION

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2342			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AMERICAN PENSION SERVICES, LLC.

2451 MCMULLEN BOOTH ROAD, SUITE 200
CLEARWATER, FL 33759

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	1900	SALES/ADMINISTRATION	5

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	0
5 Current value of plan's interest under this contract in separate accounts at year end	5	1662678

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP ANNUITY

b Balance at the end of the previous year	7b	0
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c Additions: (1) Contributions deposited during the year	7c(1)		
(2) Dividends and credits	7c(2)		
(3) Interest credited during the year	7c(3)		
(4) Transferred from separate account	7c(4)		
(5) Other (specify below)	7c(5)	0	

(6) Total additions	7c(6)	0
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d Total of balance and additions (add b and c(6))	7d	0
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	0	
(2) Administration charge made by carrier	7e(2)		
(3) Transferred to separate account	7e(3)	0	
(4) Other (specify below)	7e(4)		

(5) Total deductions	7e(5)	0
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f Balance at the end of the current year (subtract e(5) from d)	7f	0
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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
 b ☐ Dental
 c ☐ Vision
 d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
 f ☐ Long-term disability
 g ☐ Supplemental unemployment
 h ☐ Prescription drug
i ☐ Stop loss (large deductible)
 j ☐ HMO contract
 k ☐ PPO contract
 l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve.....	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2)).....		9b(3)	
(4) Claims charged.....		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions.....	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs.....	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes.....	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges.....	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement.....		9d(1)	
(2) Claim reserves.....		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in c(2).).....		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier.....	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.	10b	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information <p style="text-align: center;">This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p style="text-align: center;">▶ File as an attachment to Form 5500.</p>	<small>OMB No. 1210-0110</small> <hr/> <p style="text-align: center; font-size: 1.2em;">2010</p> <hr/> <p style="text-align: center;">This Form is Open to Public Inspection.</p>		
For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010				
A Name of plan KNIGHT ENTERPRISES 401(K) RETIREMENT & PROFIT SHARING PLAN		B Three-digit plan number (PN) ▶ 001		
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 KNIGHT ENTERPRISES		D Employer Identification Number (EIN) 59-3100430		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">Part I</td> <td>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)</td> </tr> </table>			Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)			
a Name of MTIA, CCT, PSA, or 103-12 IE: JH LIFESTYLE AGGRESSIVE				
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA				
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 193937		
a Name of MTIA, CCT, PSA, or 103-12 IE: JH LIFESTYLE GROWTH				
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA				
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 379480		
a Name of MTIA, CCT, PSA, or 103-12 IE: JH LIFESTYLE BALANCED				
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA				
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 424742		
a Name of MTIA, CCT, PSA, or 103-12 IE: JH LIFESTYLE MODERATE				
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA				
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 97737		
a Name of MTIA, CCT, PSA, or 103-12 IE: JH INTERNATIONAL VALUE FUND				
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA				
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 613		
a Name of MTIA, CCT, PSA, or 103-12 IE: JH INTL SMALL CAP FUND				
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA				
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 126		
a Name of MTIA, CCT, PSA, or 103-12 IE: JH STRATEGIC INCOME OPP FUND				
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA				
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16812		

a Name of MTIA, CCT, PSA, or 103-12 IE: JH LIFESTYLE CONSERVATIVE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 44186

a Name of MTIA, CCT, PSA, or 103-12 IE: JH OPPENHEIMER DEVELOPING MKT			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7650

a Name of MTIA, CCT, PSA, or 103-12 IE: JH T. ROWE PRICE HEALTH SCI			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 687

a Name of MTIA, CCT, PSA, or 103-12 IE: JH ROYCE OPPORTUNITY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 845

a Name of MTIA, CCT, PSA, or 103-12 IE: JH SHORT-TERM FEDERAL			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 72289

a Name of MTIA, CCT, PSA, or 103-12 IE: JH PIMCO REAL RETURN			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 375

a Name of MTIA, CCT, PSA, or 103-12 IE: JH MID CAP STOCK FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1416

a Name of MTIA, CCT, PSA, or 103-12 IE: JH T. ROWE PRICE SCI & TECH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 120

a Name of MTIA, CCT, PSA, or 103-12 IE: JH INV SMALL CAP GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 24393

a Name of MTIA, CCT, PSA, or 103-12 IE: JH MONEY MARKET FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 118326

a Name of MTIA, CCT, PSA, or 103-12 IE: JH PIMCO TOTAL RETURN			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 26998

a Name of MTIA, CCT, PSA, or 103-12 IE: JH PIMCO GLOBAL BOND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 184

a Name of MTIA, CCT, PSA, or 103-12 IE: JH T. ROWE PRICE SPECTRUM INC			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 86

a Name of MTIA, CCT, PSA, or 103-12 IE: JH FINANCIAL SERVICES FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 54

a Name of MTIA, CCT, PSA, or 103-12 IE: JH LM WESTRN ASSET GLB HIGH FIELD			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 153

a Name of MTIA, CCT, PSA, or 103-12 IE: JH OPTIMIZED VALUE FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 103

a Name of MTIA, CCT, PSA, or 103-12 IE: 500 INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 52

a Name of MTIA, CCT, PSA, or 103-12 IE: JH ALL CAP VALUE FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 54

a Name of MTIA, CCT, PSA, or 103-12 IE: JH MID VALUE FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 840

a Name of MTIA, CCT, PSA, or 103-12 IE: JH SMALL CAP OPPORTUNITIES FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code	P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 59

a Name of MTIA, CCT, PSA, or 103-12 IE: JH PIMCO ALL ASSET			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2443

a Name of MTIA, CCT, PSA, or 103-12 IE: JH AMERICAN BALANCED FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	849

a Name of MTIA, CCT, PSA, or 103-12 IE: JH WASHINGTON MUTUAL INVESTORS			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2233

a Name of MTIA, CCT, PSA, or 103-12 IE: JH T. ROWE PRICE EQUITY INC			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	11597

a Name of MTIA, CCT, PSA, or 103-12 IE: JH INVESTMENT COMPANY OF AMERICA			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	103

a Name of MTIA, CCT, PSA, or 103-12 IE: JH DAVIS NEW YORK VENTURE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	6518

a Name of MTIA, CCT, PSA, or 103-12 IE: JH BLACKROCK GLOBAL ALLOCATION			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	103

a Name of MTIA, CCT, PSA, or 103-12 IE: JH LEGG CLEARBR AGG GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	795

a Name of MTIA, CCT, PSA, or 103-12 IE: JH DFA U.S. SMALL CAP FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	543

a Name of MTIA, CCT, PSA, or 103-12 IE: JH CAPITAL APPRECIATION FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	17165

a Name of MTIA, CCT, PSA, or 103-12 IE: JH MUTUAL BEACON		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1672

a Name of MTIA, CCT, PSA, or 103-12 IE: JH MUTUAL DISCOVERY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 319

a Name of MTIA, CCT, PSA, or 103-12 IE: JH JPM MIDCAP VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 168

a Name of MTIA, CCT, PSA, or 103-12 IE: JH BLUE CHIP GROWTH FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 165

a Name of MTIA, CCT, PSA, or 103-12 IE: JH MFS UTILITIES		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 46747

a Name of MTIA, CCT, PSA, or 103-12 IE: JH BLACKROCK LARGE VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 729

a Name of MTIA, CCT, PSA, or 103-12 IE: JH SMALL CAP VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20025

a Name of MTIA, CCT, PSA, or 103-12 IE: JH REAL EST. SECURITIES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 243

a Name of MTIA, CCT, PSA, or 103-12 IE: JH COLUMBIA VALUE & RESTRUCTURING		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28405

a Name of MTIA, CCT, PSA, or 103-12 IE: JH THE GROWTH FUND OF AMERICA		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 29546

a Name of MTIA, CCT, PSA, or 103-12 IE: JH OPPENHEIMER GLOBAL		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 111

a Name of MTIA, CCT, PSA, or 103-12 IE: JH EUROPACIFIC GROWTH FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 34081

a Name of MTIA, CCT, PSA, or 103-12 IE: JH TEMPLETON WORLD		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 104

a Name of MTIA, CCT, PSA, or 103-12 IE: JH ENERGY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 44198

a Name of MTIA, CCT, PSA, or 103-12 IE: JH AMERICAN CENTURY VISTA		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1498

a Name of MTIA, CCT, PSA, or 103-12 IE: JH STRATEGIC		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: JH JENN GROWTH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: JH FINANCIAL		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: JH VS ALL GR		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2010
		This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010		
A Name of plan KNIGHT ENTERPRISES 401(K) RETIREMENT & PROFIT SHARING PLAN	B Three-digit plan number (PN)	001
C Plan sponsor's name as shown on line 2a of Form 5500 KNIGHT ENTERPRISES	D Employer Identification Number (EIN) 59-3100430	

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	6682	7894
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	3496	
(2) Participant contributions	1b(2)	5303	
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	172759	175670
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)	1217871	1662678
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	1406111	1846242

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	1406111	1846242
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	121502	
(B) Participants	2a(1)(B)	180131	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		301633
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	8279	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		8279
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		173847
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		483759

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	32283	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		32283
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	10295	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	1050	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		11345
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		43628

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		440131
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☒ Yes ☐ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: SCOTT SKIBBIE, CPA

(2) EIN: 27-0851321

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

- 4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		150000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If yes, enter the amount of any plan assets that reverted to the employer this year ☐ Yes ☒ No Amount:

- 5b** If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)

5b(2) EIN(s)	5b(3) PN(s)

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2010
		This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning <u>01/01/2010</u> and ending <u>12/31/2010</u>		
A Name of plan <u>KNIGHT ENTERPRISES 401(K) RETIREMENT & PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>KNIGHT ENTERPRISES</u>		
D Employer Identification Number (EIN) <u>59-3100430</u>		

Part I	Distributions
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All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....

1	<u>0</u>
----------	----------

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 01-0233346

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....

3	
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Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... ☐ Yes ☐ No ☐ N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6

a Enter the minimum required contribution for this plan year	6a	
b Enter the amount contributed by the employer to the plan for this plan year	6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c	

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?..... ☐ Yes ☐ No ☐ N/A

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No

Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No

11

a Does the ESOP hold any preferred stock?	☐ Yes ☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes ☐ No

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents)

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents)

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents)

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents)

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents)

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents)

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

- 19** If the total number of participants is 1,000 or more, complete items (a) through (c)

- a** Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate item 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

KNIGHT ENTERPRISES

RETIREMENT & PROFIT SHARING PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2010



Knight Enterprises
communications at the speed of light

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2010

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INDEPENDENT AUDITORS' REPORT

Administrative Committee
Knight Enterprises Retirement & Profit Sharing Plan
Clearwater, FL

We were engaged to audit the accompanying statement of net assets available for benefits of the Knight Enterprises Retirement & Profit Sharing Plan (the "Plan") as of December 31, 2010 and the related statement of changes in net assets available for benefits and the schedules of assets held for investment purposes for the year ended December 31, 2010. These financial statements and schedules are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2008 were audited by Goldstein, Zugman, Weinstein & Poole, LLC. As permitted by 29 CFR 2520.103-8 of the *Departments of Labor's Rules and Regulations for Reporting and Disclosure* under the *Employee Retirement Income Security Act of 1974*, the plan administrator instructed the other auditors not to perform and they did not perform any auditing procedures with respect to the information certified by the custodian. Their report dated October 6, 2010 indicated that because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and the form and content of the information included in the financial statements other than that derived from the information certified by the trustee, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

AS permitted by 29 CFR 2520.103-8 of the *Departments of Labor's Rules and Regulations for Reporting and Disclosure* under the *Employee Retirement Income Security Act of 1974*, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the cash and investment transactions and related income which were certified by John Hancock Life Insurance Company, the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of and for the years ended December 31, 2010 that the information provided to the plan administrator by the custodian is complete and accurate.

Because of the significance of the information in the 2010 financial statements that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 financial statements and schedule taken as a whole. The form and content of the information included in the 2010 financial statements and schedules, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Departments of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



October 5, 2011

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2010

	2010	2009
ASSETS		
CASH AND CASH EQUIVALENTS	\$ 7,894	\$ 6,682
RECEIVABLES		
Employer Receivable	-	3,496
Employee Receivable	-	5,303
Total Receivables	-	8,799
INVESTMENTS		
Guaranteed accounts	-	-
Investments, at fair value	1,662,678	1,217,871
Loans to participants	175,670	172,759
Total Investments	1,838,348	1,390,630
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$1,846,242</u>	<u>\$1,406,111</u>

The accompanying notes are an integral part of these statements

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR(S) ENDED DECEMBER 31, 2010

	<u>2010</u>	<u>2009</u>
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Contributions:		
Employer	\$ 121,502	\$ 110,754
Participant	180,131	164,244
Participant rollovers	-	-
Total contributions	<u>301,633</u>	<u>274,998</u>
Net appreciation in fair value of investments	173,847	263,757
Interest, dividends and other income	<u>8,279</u>	<u>7,618</u>
Total Additions	<u>483,759</u>	<u>546,373</u>
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Net depreciation in fair value of investments	-	-
Distributions to participants	32,283	134,404
Corrective distributions	-	-
Administrative expenses	<u>11,345</u>	<u>10,574</u>
Total Deductions	<u>43,628</u>	<u>144,978</u>
NET CHANGE IN NET ASSETS AVAILABLE FOR BENEFITS	440,131	401,395
Transfers To (From) the Plan	-	-
NET ASSETS AVAILABLE FOR BENEFITS, beginning of year	<u>1,406,111</u>	<u>1,004,716</u>
NET ASSETS AVAILABLE FOR BENEFITS, end of year	<u><u>\$ 1,846,242</u></u>	<u><u>\$ 1,406,111</u></u>

The accompanying notes are an integral part of these statements

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1. DESCRIPTION OF PLAN

The following description of Knight Enterprises Retirement & Profit Sharing Plan (the “Plan”) provides only general information. Users of the financial statements and supplemental schedule should refer to the Plan documents for a more complete description of the Plan’s provisions.

General: The Plan is a defined contribution plan established to provide for contributions made under salary deferral agreements pursuant to Section 401(k) of the internal Revenue Code (the “Code”). The Plan covers substantially all eligible employees of Jeffry Knight, Inc., dba Knight Enterprises (hereafter referred to as the “Company”). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Eligibility: Employees may participate in the Plan once they are age 21 and have one year of service (1,000 hours of service in a 12 consecutive month period).

Contributions: Eligible employees may make contributions via payroll deductions up to limits as defined in the Plan and other limits in accordance with the Code. Elective deferrals can be made in whole percentages of compensation or in specific dollar amounts.

The Company may make matching contributions to the Plan, at its discretion, equal to a specified percent of each participant’s deferral amounts. In addition, the Company may make an additional discretionary contribution to participants of the Plan as deemed appropriate by the Company. Contributions are subject to limitations as provided in the Code and as defined in the Plan.

Participant Accounts: Each participant’s account is credited with the participant’s contributions, the Company’s matching contribution, an allocation of the Company’s additional discretionary contribution, if any, and Plan earnings. Each participant’s account is charged with Plan losses and expenses, if any. Allocations are based on participant account balances, as defined. The benefit to which a participant is entitled to is the benefit that can be provided from the participant’s vested account.

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1. DESCRIPTION OF PLAN (continued...)

Investment Options: Upon enrollment in the Plan, a participant may direct contributions to one or more investment options. Participants may change their investment options at any time at their discretion. See the accompany schedule of assets held for a list of investment options currently available.

Vesting: Participants are immediately vested in their contributions, voluntary rollovers, and the actual allocated earnings thereon. Vesting in the Company's matching and discretionary contributions plus actual earnings thereon occurs under the following schedule:

<u>Years of Service</u>	<u>Vested Percentage</u>
Less than 1	0 %
1	20 %
2	40 %
3	60 %
4	80 %
5 or more	100 %

Forfeitures: Upon termination of employment the non-vested portion of a participant's account is forfeited. Forfeitures may be returned to the Company or used to reduce the Company's matching contributions.

Benefit Payments: Upon reaching normal retirement age, termination of employment, death or disability, or termination of the Plan, the participant or beneficiary may elect to receive an amount equal to the value of the participant's vested interest in his or her account under several options. A participant may defer paying tax on some taxable payments by electing a rollover distribution.

In the event of a participant's death, his or her designated beneficiary may request a distribution of his or her account.

Withdrawals may also be made in conjunction with IRS hardship distribution regulations.

Participant Loans: Participants may borrow from their account up to a maximum of the lesser of \$50,000 or 50% of their vested account balance. Principal and interest are paid ratably through payroll deductions. Interest rates on participant loans approximate prevailing interest rates on bank loans of similar length of time and repayment terms. The loans are secured by the balance in the participant's account.

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

Note 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting: The financial statements of the Plan are prepared using the accrual method of accounting.

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Statements of Net Assets Available for Benefits and The Statements of Changes in Net Assets Available for Benefits are presented using the fair values of investments.

Fair Value Measurements: The FASB Accounting Standards codification Topic 820, *Fair Value Measurements and Disclosures* (ASC 820) establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described as follows:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 – Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable market data by correlation or other means;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means;

If the assets or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

Note 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued...)

Fair Value Measurements (continued...): The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. There have been no changes in the valuation methodologies used at December 31, 2010.

Accounting Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

Valuation of Investments: The plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Investments in the insurance company general account are valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering credit worthiness of the issuer. Investments in the pooled separate accounts are valued indirectly based on observable prices for the underlying assets.

The preceding methods described may produce a fair value calculation that may not be indicative of the net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Purchases and sales of investments are recorded on the trade date. Income from investment in units of participation is recorded as earned and reinvested in the accounts. Income earned from investments and gains or losses on disposal of investments are recorded using the accrual method. Participant loans are valued at cost.

Payment of benefits: Benefits are recorded when paid.

Administrative Expense: The cost and expense of administering the Plan shall be paid, at the discretion of the Company, either directly by the Company or by the Plan through fees deducted from participant accounts.

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

Note 3. CERTIFICATION OF INVESTMENT INFORMATION

John Hancock Life Insurance Company, the custodian of the Plan, has supplied the Plan administrator with a certification as to the completeness and accuracy of all investment information reflected on the accompanying statements of net assets available for benefits as of December 31, 2010 and 2009, the statements of changes in net assets available for benefits for the years then ended, and the supplemental schedule of assets held as of December 31, 2010 and 2009.

Note 4. INVESTMENTS

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual Funds	\$1,662,678	\$ -	\$ -	\$1,662,678
Participant Loans	-	-	175,670	175,670
Total Investments	<u>\$1,662,678</u>	<u>\$ -</u>	<u>\$175,670</u>	<u>\$1,838,348</u>

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2010:

	<u>Participant Loans</u>
Balance, Beginning of Year	\$ 172,759
Purchases, issuances and settlements	<u>2,911</u>
Balance, End of Year	<u>\$ 175,670</u>

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

Note 5. 5% REPORTABLE TRANSACTIONS

The investment balances that represent 5% or more of the Plan's net assets available for benefits as of December 31, 2010 are as follows:

John Hancock Life Ins Co	Lifestyle Aggressive	\$ 193,937
John Hancock Life Ins Co	Lifestyle Balanced	424,742
John Hancock Life Ins Co	Lifestyle Growth	379,480
John Hancock Life Ins Co	Lifestyle Moderate	97,737
John Hancock Life Ins Co	Money Market Fund	118,326

Note 6. RECONCILIATION TO FORM 5500

Certain differences could exist between the recording of accruals for financial reporting purposes and IRS/Department of Labor's (DOL) Form 5500 purposes. As of and for the year ended December 31, 2010 there were no such differences.

Note 7. SUBSEQUENT EVENTS

Subsequent events have been evaluated through October 5, 2011, which is the date the financial statements were available to be issued.

Note 8. TAX STATUS

Although the Plan has not received a determination letter from the Internal Revenue Service, it has adopted a pre-approved Prototype Plan. The Plan Administrator believes that the Plan is designed and is being operated in compliance with the applicable provisions of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the plan's financial statements

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

Note 9. PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become fully vested in their accounts.

Note 10. RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near-term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Note 11. PARTIES-IN-INTEREST TRANSACTIONS

Administrative fees include investment fees, third party administrative fees, and other professional services, and are based on customary charges as shall be agreed to from time to time. Certain of these expenses are absorbed by the Plan sponsor. Certain administrative functions are performed by officers or employees of the Plan's sponsor. No such officer or employee receives compensation from the Plan.

SUPPLEMENTAL INFORMATION

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

Schedule H, line 4i - Schedule of Assets (Held at End of Year)

DECEMBER 31, 2010

59-3100430

PN 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment	(d) Cost	(e) Current value
	John Hancock Life Ins Co	500 Index Fund	\$ 44	\$ 52
	John Hancock Life Ins Co	All Cap Value Fund	43	54
	John Hancock Life Ins Co	American Balanced Fund	762	849
	John Hancock Life Ins Co	American Century Vista	1,149	1,498
	John Hancock Life Ins Co	BlackRock Global Allocation	95	103
	John Hancock Life Ins Co	BlackRock Large Value	655	729
	John Hancock Life Ins Co	Blue Chip Growth Fund	143	165
	John Hancock Life Ins Co	Capital Appreciation Fund	15,799	17,165
	John Hancock Life Ins Co	Columbia Value & Restructuring	21,424	28,405
	John Hancock Life Ins Co	Davis New York Venture	5,457	6,518
	John Hancock Life Ins Co	DFA U.S. Small Cap Fund	321	543
	John Hancock Life Ins Co	Energy	33,876	44,198
	John Hancock Life Ins Co	EuroPacific Growth Fund	29,723	34,081
	John Hancock Life Ins Co	Financial Services Fund	52	54
	John Hancock Life Ins Co	International Value Fund	711	613
	John Hancock Life Ins Co	Intl Small Cap Fund	91	126
	John Hancock Life Ins Co	Inv Small Cap Growth	19,686	24,393
	John Hancock Life Ins Co	Investment Company of America	89	103
	John Hancock Life Ins Co	JPM MidCap Value Fund	135	168
	John Hancock Life Ins Co	Legg Mason ClearBr Agg Growth	602	795
	John Hancock Life Ins Co	Lifestyle Aggressive	163,119	193,937
	John Hancock Life Ins Co	Lifestyle Balanced	337,718	424,742
	John Hancock Life Ins Co	Lifestyle Conservative	38,437	44,186
	John Hancock Life Ins Co	Lifestyle Growth	311,755	379,480
	John Hancock Life Ins Co	Lifestyle Moderate	84,465	97,737
	John Hancock Life Ins Co	LM Western Asset Glb High Yield	128	153
	John Hancock Life Ins Co	MFS Utilities	37,045	46,747
	John Hancock Life Ins Co	Mid Cap Stock Fund	1,472	1,417
	John Hancock Life Ins Co	Mid Value Fund	650	840
	John Hancock Life Ins Co	Money Market Fund	118,513	118,326
	John Hancock Life Ins Co	Mutual Beacon	1,234	1,672
	John Hancock Life Ins Co	Mutual Global Discovery	280	319

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

Schedule H, line 4i - Schedule of Assets (Held at End of Year)

DECEMBER 31, 2010 (continued...)

59-3100430

PN 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment	(d) Cost	(e) Current value
	John Hancock Life Ins Co	Oppenheimer Developing Market	5,619	7,650
	John Hancock Life Ins Co	Oppenheimer Global	95	111
	John Hancock Life Ins Co	Optimized Value Fund	89	103
	John Hancock Life Ins Co	Pimco All Asset	2,342	2,443
	John Hancock Life Ins Co	Pimco Global Bond	165	184
	John Hancock Life Ins Co	Pimco Real Return	339	375
	John Hancock Life Ins Co	Pimco Total Return	24,872	26,998
	John Hancock Life Ins Co	Real Est. Securities Fund	192	243
	John Hancock Life Ins Co	Royce Opportunity	605	845
	John Hancock Life Ins Co	Short -Term Federal	68,918	72,289
	John Hancock Life Ins Co	Small Cap Opportunities Fund	43	59
	John Hancock Life Ins Co	Small Cap Value Fund	16,371	20,025
	John Hancock Life Ins Co	Strategic Income Opp Fund	15,598	16,812
	John Hancock Life Ins Co	T. Rowe Price Equity Inc.	10,195	11,597
	John Hancock Life Ins Co	T. Rowe Price Health Sci	537	687
	John Hancock Life Ins Co	T. Rowe Price Sci & Tech	92	120
	John Hancock Life Ins Co	T. Rowe Price Spectrum Inc	78	86
	John Hancock Life Ins Co	Templeton World	100	104
	John Hancock Life Ins Co	The Growth Fund of America	24,545	29,546
	John Hancock Life Ins Co	Washington Mutual Investors	1,956	2,233
	John Hancock Life Ins Co	Various Interest Rates	-	175,670
	TOTAL ASSETS HELD			<u>\$1,838,348</u>

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

Schedule H, line 4i - Schedule of Assets (Acquired and Disposed of Within Year)

DECEMBER 31, 2010

59-3100430

PN 001

(a) Identity of Issue, borrower, lessor, or similar party	(b) Description of investment	(c) Costs of acquisitions	(d) Proceeds from dispositions
John Hancock Life Ins Co	500 Index Fund	\$ 44	\$ 49
John Hancock Life Ins Co	All Cap Growth Fund	54	302
John Hancock Life Ins Co	All Cap Value Fund	44	50
John Hancock Life Ins Co	American Balanced Fund	220	241
John Hancock Life Ins Co	American Century Vista	578	359
John Hancock Life Ins Co	BlackRock Global Allocation	88	85
John Hancock Life Ins Co	BlackRock Large Value	452	645
John Hancock Life Ins Co	Blue Chip Growth Fund	254	490
John Hancock Life Ins Co	Capital Appreciation Fund	15,174	364
John Hancock Life Ins Co	Columbia Value & Restructuring	13,610	4,614
John Hancock Life Ins Co	Davis Financial	11	66
John Hancock Life Ins Co	Davis New York Venture	1,260	129
John Hancock Life Ins Co	DFA U.S. Small Cap Fund	44	452
John Hancock Life Ins Co	Energy	11,043	10,410
John Hancock Life Ins Co	EuroPacific Growth Fund	20,996	21,993
John Hancock Life Ins Co	Financial Services Fund	98	49
John Hancock Life Ins Co	International Value Fund	-	464
John Hancock Life Ins Co	Intl Small Cap Fund	92	107
John Hancock Life Ins Co	Inv Small Cap Growth	11,252	2,018
John Hancock Life Ins Co	Investment Company of America	88	96
John Hancock Life Ins Co	Jennison Growth	5,272	11,851
John Hancock Life Ins Co	JPM MidCap Value Fund	132	153
John Hancock Life Ins Co	Legg Mason ClearBr Agg Growth	299	4
John Hancock Life Ins Co	Lifestyle Aggressive	48,501	2,981
John Hancock Life Ins Co	Lifestyle Balanced	93,865	45,062
John Hancock Life Ins Co	Lifestyle Conservative	13,580	309
John Hancock Life Ins Co	Lifestyle Growth	85,122	14,472
John Hancock Life Ins Co	Lifestyle Moderate	39,781	16,072
John Hancock Life Ins Co	LM Western Asset Glb High Yield	132	141
John Hancock Life Ins Co	MFS Utilities	14,445	24,071
John Hancock Life Ins Co	Mid Cap Stock Fund	132	1,109
John Hancock Life Ins Co	Mid Value Fund	389	152
John Hancock Life Ins Co	Money Market Fund	92,552	609
John Hancock Life Ins Co	Mutual Beacon	220	246
John Hancock Life Ins Co	Mutual Global Discovery	171	210

KNIGHT ENTERPRISES RETIREMENT & PROFIT SHARING PLAN

Schedule H, line 4i - Schedule of Assets (Acquired and Disposed of Within Year)

DECEMBER 31, 2010 (continued...)

59-3100430

PN 001

(a) Identity of Issue, borrower, lessor, or similar party	(b) Description of investment	(c) Costs of acquisitions	(d) Proceeds from dispositions
John Hancock Life Ins Co	Oppenheimer Developing Market	4,423	32,215
John Hancock Life Ins Co	Oppenheimer Global	89	102
John Hancock Life Ins Co	Optimized Value Fund	88	96
John Hancock Life Ins Co	Pimco All Asset	3,467	23,421
John Hancock Life Ins Co	Pimco Global Bond	176	179
John Hancock Life Ins Co	Pimco Real Return	168	276
John Hancock Life Ins Co	Pimco Total Return	17,281	350
John Hancock Life Ins Co	Real Est. Securities Fund	179	212
John Hancock Life Ins Co	Royce Opportunity	350	171
John Hancock Life Ins Co	Short -Term Federal	12,421	54,947
John Hancock Life Ins Co	Small Cap Opportunities Fund	44	53
John Hancock Life Ins Co	Small Cap Value Fund	10,418	3,483
John Hancock Life Ins Co	Strategic Income	6,021	16,800
John Hancock Life Ins Co	Strategic Income Opp Fund	16,511	902
John Hancock Life Ins Co	T. Rowe Price Equity Inc.	6,352	3,131
John Hancock Life Ins Co	T. Rowe Price Health Sci	218	266
John Hancock Life Ins Co	T. Rowe Price Sci & Tech	88	104
John Hancock Life Ins Co	T. Rowe Price Spectrum Inc	88	94
John Hancock Life Ins Co	Templeton World	88	3,037
John Hancock Life Ins Co	The Growth Fund of America	16,868	2,744
John Hancock Life Ins Co	Washington Mutual Investors	226	391

**Scott
Skibbie, Inc.**
Certified Public Accountant

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Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2010</div> This Form is Open to Public Inspection
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Part I Annual Report Identification Information For the calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010		
A This return/report is for:	☐ a multiemployer plan; ☒ a single-employer plan;	☐ a multiple-employer plan; or ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report; ☐ an amended return/report;	☐ the final return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here	☐	
D Check box if filing under:	☒ Form 5558; ☐ special extension (enter description)	☐ automatic extension; ☐ the DFVC program;

Part II Basic Plan Information --- enter all requested information.		
1a Name of plan KNIGHT ENTERPRISES 401 (K) RETIREMENT & PROFIT SHARING PLAN	1b Three-digit plan number (PN) ▶	001
1c Effective date of plan 07/01/1998		
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) KNIGHT ENTERPRISES 6056 ULMERTON ROAD US CLEARWATER FL 33760	2b Employer Identification Number (EIN) 59-3100430 2c Sponsor's telephone number (727) 524-6235 2d Business code (see instructions) 238900	

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE		10-14-11	JEFFRY D. KNIGHT
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		10-14-11	JEFFRY D. KNIGHT
	Signature of employer plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2010)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") SAME		3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5	142
6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c and 6d)		
a Active participants	6a	137
b Retired or separated participants receiving benefits	6b	0
c Other retired or separated participants entitled to future benefits	6c	4
d Subtotal. Add lines 6a, 6b and 6c	6d	141
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	0
f Total. Add lines 6d and 6e	6f	141
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	73
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	1
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer complete this item)		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: 2E 2J 2K 2T 3D		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:		

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	(1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules	b General Schedules
(1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(1) ☒ H (Financial Information) (2) ☐ I (Financial Information - Small Plan) (3) ☒ A (Insurance Information) 1 (4) ☐ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Information)

Schedule H, line 4i

Schedule of Assets (Held At End of Year)

For the plan year beginning **01/01/2010** and ending **12/31/2010**

Name of plan

KNIGHT ENTERPRISES 401(K) RETIREMENT & PROFIT SHARING PLAN

Employer Identification Number

59-3100430

Three-digit
plan number

► **001**

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	JOHN HANCOCK LIFE INSURANCE CO	500 INDEX FUND	44	52
	JOHN HANCOCK LIFE INSURANCE CO	ALL CAP VALUE FUND	43	54
	JOHN HANCOCK LIFE INSURANCE CO	AMERICAN BALANCED FUND	762	849
	JOHN HANCOCK LIFE INSURANCE CO	AMERICAN CENTURY VISTA	1,149	1,498
	JOHN HANCOCK LIFE INSURANCE CO	BLACKROCK GLOBAL ALLOCATION	95	103
	JOHN HANCOCK LIFE INSURANCE CO	BLACKROCK LARGE VALUE	655	729
	JOHN HANCOCK LIFE INSURANCE CO	BLUE CHIP GROWTH FUND	143	165
	JOHN HANCOCK LIFE INSURANCE CO	CAPITAL APPRECIATION FUND	15,799	17,165
	JOHN HANCOCK LIFE INSURANCE CO	COLUMBIA VALUE & RESTRUCTURING	21,424	28,405
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	JOHN HANCOCK LIFE INSURANCE CO	DFA US SMALL CAP FUND	321	543
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	JOHN HANCOCK LIFE INSURANCE CO	INTERNATIONAL VALUE FUND	711	613
	JOHN HANCOCK LIFE INSURANCE CO	INTERNATIONAL SMALL CAP FUND	91	126
	JOHN HANCOCK LIFE INSURANCE CO	INV SMALL CAP GROWTH	19,686	24,393
	JOHN HANCOCK LIFE INSURANCE CO	INVESTMENT COMPANY OF AMERICA	89	103
	JOHN HANCOCK LIFE INSURANCE CO	JPM MIDCAP VAL FUND	135	168
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	JOHN HANCOCK LIFE INSURANCE CO	LIFESTYLE GROWTH	311,755	379,480
	JOHN HANCOCK LIFE INSURANCE CO	LIFESTYLE MODERATE	84,465	97,737
	JOHN HANCOCK LIFE INSURANCE CO	LM WESTERN ASSET GLB HIGH YLD	128	153
	JOHN HANCOCK LIFE INSURANCE CO	MFS UTILITIES	37,045	46,747
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	JOHN HANCOCK LIFE INSURANCE CO	MUTUAL GLOBAL DISCOVERY	280	319
	JOHN HANCOCK LIFE INSURANCE CO	OPPENHEIMER DEVELOPING MARKET	5,619	7,650
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Schedule H, line 4i

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JOHN HANCOCK LIFE INSURANCE CO	500 INDEX FUND	44	49
JOHN HANCOCK LIFE INSURANCE CO	ALL CAP GROWTH FUND	54	302
JOHN HANCOCK LIFE INSURANCE CO	ALL CAP VALUE FUND	44	50
JOHN HANCOCK LIFE INSURANCE CO	AMERICAN BALANCED FUND	220	241
JOHN HANCOCK LIFE INSURANCE CO	AMERICAN CENTURY VISTA	578	359
JOHN HANCOCK LIFE INSURANCE CO	BLACKROCK GLOBAL ALLOCATION	88	85
JOHN HANCOCK LIFE INSURANCE CO	BLACKROCK LARGE VALUE	452	645
JOHN HANCOCK LIFE INSURANCE CO	BLUE CHIP GROWTH FUND	254	490
JOHN HANCOCK LIFE INSURANCE CO	CAPITAL APPRECIATION FUND	15,174	364
JOHN HANCOCK LIFE INSURANCE CO	COLUMBIA VALUE & RESTRUCTURING	13,610	4,614
JOHN HANCOCK LIFE INSURANCE CO	DAVIS FINANCIAL FUND	11	66
JOHN HANCOCK LIFE INSURANCE CO	DFA US SMALL CAP FUND	44	452
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JOHN HANCOCK LIFE INSURANCE CO	FINANCIAL SERVICES FUND	98	49
JOHN HANCOCK LIFE INSURANCE CO	INTERNATIONAL VALUE FUND	0	464
JOHN HANCOCK LIFE INSURANCE CO	INTERNATIONAL SMALL CAP FUND	92	107
JOHN HANCOCK LIFE INSURANCE CO	INTERNATIONAL SMALL CAP GROWTH	11,252	2,018
JOHN HANCOCK LIFE INSURANCE CO	INVESTMENT COMPANY OF AMERICA	88	96
JOHN HANCOCK LIFE INSURANCE CO	JENNISON GROWTH	5,272	11,851
JOHN HANCOCK LIFE INSURANCE CO	JPM MIDCAP VALUE FUND	132	153
JOHN HANCOCK LIFE INSURANCE CO	LEGG MASON CLEARBR AGG GROWTH	299	4
JOHN HANCOCK LIFE INSURANCE CO	LIFESTYLE AGGRESSIVE	48,501	2,981
JOHN HANCOCK LIFE INSURANCE CO	LIFESTYLE BALANCED	93,865	45,062
JOHN HANCOCK LIFE INSURANCE CO	LIFESTYLE CONSERVATIVE	13,580	309
JOHN HANCOCK LIFE INSURANCE CO	LIFESTYLE GROWTH	85,122	14,472
JOHN HANCOCK LIFE INSURANCE CO	LIFESTYLE MODERATE	39,781	16,072
JOHN HANCOCK LIFE INSURANCE CO	LM WESTERN ASSET GLB HIGH YIELD	132	141
JOHN HANCOCK LIFE INSURANCE CO	MFS UTILITIES	14,445	24,071
JOHN HANCOCK LIFE INSURANCE CO	MID CAP STOCK FUND	132	1,109
JOHN HANCOCK LIFE INSURANCE CO	MID VALUE FUND	389	152
JOHN HANCOCK LIFE INSURANCE CO	MONEY MARKET FUND	92,552	609
JOHN HANCOCK LIFE INSURANCE CO	MUTUAL BEACON	220	246
JOHN HANCOCK LIFE INSURANCE CO	MUTUAL GLOBAL DISCOVERY	171	210
JOHN HANCOCK LIFE INSURANCE CO	OPPENHEIMER DEVELOPING MARKET	4,423	32,215
JOHN HANCOCK LIFE INSURANCE CO	OPPENHEIMER GLOBAL	89	102
JOHN HANCOCK LIFE INSURANCE CO	OPTIMIZED VALUE FUND	88	96
JOHN HANCOCK LIFE INSURANCE CO	PIMCO ALL ASSET	3,467	23,421
JOHN HANCOCK LIFE INSURANCE CO	PIMCO GLOBAL BOND	176	179

Schedule of Assets (Acquired and Disposed of Within Year).

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