

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154952

Entity Name: BLUE GARAGE CO.

FILED  
Jan 20, 2005  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 4009  
WINTER PARK, FL 327934009

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4009  
WINTER PARK, FL 327934009

**New Mailing Address:**

FEI Number: 30-0227770

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LACEK, MARTIN  
2703 SUMMERFIELD RD  
WINTER PARK, FL 32792 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WILSON, ROBLEY  
Address: P.O. BOX 4009  
City-St-Zip: WINTER PARK, FL 327934009

Title: VD ( ) Delete  
Name: HUBBARD, SUSAN  
Address: P.O. BOX 4009  
City-St-Zip: WINTER PARK, FL 327934009

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBLEY WILSON

PD

01/20/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date