## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000029559

FILED Apr 30, 2009 Secretary of State

Entity Name: BLANKENE	BAKER LAND SERVICES, INC	C.		
Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
1054 PULITZER RD FT PIERCE, FL 34945				
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
PO BOX 193 FT PIERCE, FL 34954				
FEI Number: 20-2294942	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
YATES, E. CLAYTON 311 S SECOND ST STE 102 FT PIERCE, FL 34950 US	3			
The above named entity su in the State of Florida.	bmits this statement for the pu	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		nt	Date	
Election Campaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: P () C Name: BLANKENBAKER Address: 1054 PULITZER I	RD	Title: P (X Name: BLANKENBAK Address: 1054 PULITZE	ER RD	

City-St-Zip: FT PIERCE, FL 34954 City-St-Zip: FT PIERCE, FL 34945

() Delete Title: (X) Change ( ) Addition BLANKENBAKER, CLAYTON BLANKENBAKER, CLAYTON Name: Name: Address: 1054 PULITZER RD Address: 1054 PULITZER RD FT PIERCE, FL 34945 FT PIERCE, FL 34954 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete (X) Change ( ) Addition Name: BLANKENBAKER, MICHELLE Name: BLANKENBAKER, KELLY

Address: 1054 PULITZER RD Address: 1054 PULITZER RD City-St-Zip: FT PIERCE, FL 34954 City-St-Zip: FT PIERCE, FL 34945

Title: () Delete Title: (X) Change ( ) Addition

BLANKENBAKER, CAROL BLANKENBAKER, CAROL Name: Name: Address: 1054 PULITZER RD Address: 1054 PULITZER RD FT PIERCE, FL 34954 FT PIERCE, FL 34945 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CAROL BLANKENBAKER Τ 04/30/2009