


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000095867**  
 1. Entity Name  
**BLANKE ENTERPRISES, INC.**



Principal Place of Business      Mailing Address  
 3711 WATERSIDE DRIVE      3711 WATERSIDE DRIVE  
 ORANGE PARK, FL 32065      ORANGE PARK, FL 32065



04182007    No Chg-P    CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
**59-3414092**      Not Applicable

5. Certificate of Status Desired        **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**BLANKE, THOMAS C**  
 3711 WATERSIDE DRIVE  
 N  
 ORANGE PARK, FL 32065

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BLANKE, THOMAS C
STREET ADDRESS	3711 WATERSIDE DRIVE
CITY-ST-ZIP	ORANGE PARK, FL 32065
TITLE	D
NAME	BLANKE, CYNTHIA J
STREET ADDRESS	3711 WATERSIDE DRIVE
CITY-ST-ZIP	ORANGE PARK, FL 32065
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 05/02/07-80018-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Blank / CJ BLANKE      19 APR 07      904.982.0732  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #