
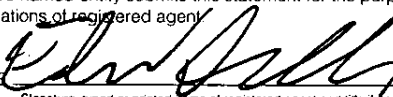
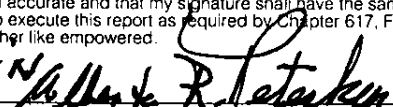


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2008 8:00 am**  
**Secretary of State**

04-18-2008 90054 010 \*\*\*\*61.25

<b>DOCUMENT # 707802</b> 1. Entity Name <b>BLAIR HOUSE ASSOCIATION INC</b>																																																																																																																													
Principal Place of Business <b>1928 LAKE WORTH RD</b> <b>LAKE WORTH, FL 33461 US</b>			Mailing Address <b>1928 LAKE WORTH RD</b> <b>LAKE WORTH, FL 33461 US</b>																																																																																																																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country																																																																																																																											
4. FEI Number <b>59-1114206</b>				Applied For <input type="checkbox"/> Not Applicable																																																																																																																									
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>																																																																																																																									
<b>6. Name and Address of Current Registered Agent</b> <b>ASSOCIATED PROPERTY MANAGEMENT</b> <b>1928 LAKE WORTH ROAD</b> <b>LAKE WORTH, FL 33461</b>			<b>7. Name and Address of New Registered Agent</b> Name <b>EDWARD DICKER ESQUIRE</b> Street Address (P.O. Box Number is Not Acceptable) <b>1818 Australian Ave. South</b> <b>Suite 400</b> City <b>West Palm Beach FL</b> Zip Code <b>33409</b>																																																																																																																										
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE   <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 40%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 20%; text-align: right;"> <small>DATE</small> </div> </div>																																																																																																																													
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																																																																																																																									
<b>Make check payable to Florida Department of State</b>																																																																																																																													
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">PD</td> <td style="width: 15%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>WOODS, PERRY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>331 TEQUESTA DR. #123</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TEQUESTA, FL 33469</td> <td></td> </tr> <tr> <td>TITLE</td> <td>STD</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PETERKIN, ALBERTA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>331 TEQUESTA DRIVE #209</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TEQUESTA, FL 33469</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VD</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>COBEN, PAUL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>470 TEQUESTA DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TEQUESTA, FL 33469</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>BURNICK, MARITA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>331 TEQUESTA DR. #116</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>TEQUESTA, FL 33469</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>TURGISS, PEG</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>151 HIGH PLAIN RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ANDOVER, MA 01810</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 15%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	PD	<input type="checkbox"/> Delete	NAME	WOODS, PERRY		STREET ADDRESS	331 TEQUESTA DR. #123		CITY-ST-ZIP	TEQUESTA, FL 33469		TITLE	STD	<input type="checkbox"/> Delete	NAME	PETERKIN, ALBERTA		STREET ADDRESS	331 TEQUESTA DRIVE #209		CITY-ST-ZIP	TEQUESTA, FL 33469		TITLE	VD	<input type="checkbox"/> Delete	NAME	COBEN, PAUL		STREET ADDRESS	470 TEQUESTA DR		CITY-ST-ZIP	TEQUESTA, FL 33469		TITLE	D	<input type="checkbox"/> Delete	NAME	BURNICK, MARITA		STREET ADDRESS	331 TEQUESTA DR. #116		CITY-ST-ZIP	TEQUESTA, FL 33469		TITLE	D	<input type="checkbox"/> Delete	NAME	TURGISS, PEG		STREET ADDRESS	151 HIGH PLAIN RD		CITY-ST-ZIP	ANDOVER, MA 01810		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete																																																																																																																											
NAME	WOODS, PERRY																																																																																																																												
STREET ADDRESS	331 TEQUESTA DR. #123																																																																																																																												
CITY-ST-ZIP	TEQUESTA, FL 33469																																																																																																																												
TITLE	STD	<input type="checkbox"/> Delete																																																																																																																											
NAME	PETERKIN, ALBERTA																																																																																																																												
STREET ADDRESS	331 TEQUESTA DRIVE #209																																																																																																																												
CITY-ST-ZIP	TEQUESTA, FL 33469																																																																																																																												
TITLE	VD	<input type="checkbox"/> Delete																																																																																																																											
NAME	COBEN, PAUL																																																																																																																												
STREET ADDRESS	470 TEQUESTA DR																																																																																																																												
CITY-ST-ZIP	TEQUESTA, FL 33469																																																																																																																												
TITLE	D	<input type="checkbox"/> Delete																																																																																																																											
NAME	BURNICK, MARITA																																																																																																																												
STREET ADDRESS	331 TEQUESTA DR. #116																																																																																																																												
CITY-ST-ZIP	TEQUESTA, FL 33469																																																																																																																												
TITLE	D	<input type="checkbox"/> Delete																																																																																																																											
NAME	TURGISS, PEG																																																																																																																												
STREET ADDRESS	151 HIGH PLAIN RD																																																																																																																												
CITY-ST-ZIP	ANDOVER, MA 01810																																																																																																																												
TITLE		<input type="checkbox"/> Delete																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
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 617, 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: <b>A. R. PETERKIN</b>  <b>APRIL 14-2008</b>																																																																																																																													
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																																													
<small>Date Daytime Phone #</small>																																																																																																																													

40072734



03262008 Chg-NP CR2E037 (12/06)