

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037348

Entity Name: BLU AT 5 POINTS, INC.**Current Principal Place of Business:**1212 TALBOT AVENUE
JACKSONVILLE, FL 32205**Current Mailing Address:**1212 TALBOT AVENUE
JACKSONVILLE, FL 32205 US**FEI Number:** 20-0821178**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EVANS, JOHN RJR
1212 TALBOT AVE
JACKSONVILLE, FL 32205 US*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**Officer/Director Detail :**

Title	CEO
Name	EVANS, JOHN RJR
Address	1212 TALBOT AVE
City-State-Zip:	JACKSONVILLE FL 32204

Title	VD
Name	RANIER, SIBYL P
Address	1666 LANE AVE S
City-State-Zip:	JACKSONVILLE FL 32210

Title	SD
Name	NELSON, SYLVIA
Address	1666 LANE AVE S.
City-State-Zip:	JACKSONVILLE FL 32210

Title	PTD
Name	EVANS, JOHN RJR
Address	1212 TALBOT AVENUE
City-State-Zip:	JACKSONVILLE FL 32204

Title	SD
Name	ALEXANDER, DIANNE
Address	8367 GRAMPELL DRIVE
City-State-Zip:	JACKSONVILLE FL 32221

I hereby 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 all other like empowered.

SIGNATURE: DIANNE ALEXANDER

SD

04/08/2013

Electronic Signature of Signing Officer/Director Detail_____
Date