

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 391043

**FILED**  
**Jan 30, 2011**  
**Secretary of State**

**Entity Name:** BLANDFORD GROVES, INC.

**Current Principal Place of Business:**

28242 LAKE TERRY DRIVE  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8  
MOUNT DORA, FL 32756 US

**New Mailing Address:**

PO BOX 8  
MOUNT DORA, FL 32756 US

**FEI Number:** 59-1363573

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLAND, WILLIAM T., JR.  
28242 LAKE TERRY DRIVE  
MOUNT DORA, FL 32757 US

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

WILLIAM T BLAND, JR  
28242 LAKE TERRY DRIVE  
MOUNT DORA, FL 32757 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: WILLIAM T BLAND JR

01/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: WILLIAM T BLAND, JR  
Address: P.O. BOX 8  
City-St-Zip: MOUNT DORA, FL 327560008

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: WILLIAM T BLAND JR

PSTD

01/30/2011

Electronic Signature of Signing Officer or Director

Date