

445442

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

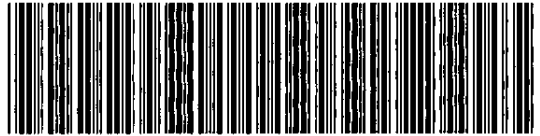
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 APR 23 AM 10:00

Rd/chg
@ 4/27/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Blair Properties, Inc.
Name of Corporation

DOCUMENT NUMBER: 445442

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharie Hitz
Name of Contact Person

Blair Properties, Inc.
Firm/Company

2300 Midnight Pass CT
Address

The Villages, FL 32162
City/State and Zip Code

maranatha7amen-f1@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharie Hitz at (352) 430-0800
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Florida

 in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Blair Properties
2. The principal office address: 2300 Midnight Pass CT, The Villages, FL 32162
3. The mailing address (if different): c/o Sharie Hitz, 2300 Midnight Pass CT, The Villages, FL 32162
4. Date of incorporation/qualification: 3/11/1974 Document number: 445442
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

Sharie Hitz

39 Columbus Court

Palm Coast, FL 32137

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

Sharie Hitz

2300 Midnight Pass CT

P.O. Box NOT acceptable

The Villages, FL 32162

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The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.

Sharie Hitz
Signature of an officer or director

Sharie Hitz Pres.
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity,
I further agree to comply with the provisions of all statutes relative to the proper and complete performance
of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.*

Sharie Hitz
Signature of Registered Agent

4-21-10
Date

If signing on behalf of an entity:

Sharie Hitz
Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314