

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728162

FILED
Jan 05, 2010
Secretary of State

Entity Name: THE BLACKSTONE BUILDING, INC.

Current Principal Place of Business:

233 EAST BAY STREET
ROOM M-01
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

233 EAST BAY STREET
ROOM M-01
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-1532978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCULLOUGH, MICHAEL R
233 EAST BAY STREET
STE. 1010
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: MCCULLOUGH, MICHAEL R
Address: 233 EAST BAY STREET, STE. 1010
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: FERNANDEZ, JOAN Z
Address: 233 EAST BAY STREET, STE. 1113
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: TERRELL, JAMES T.
Address: 233 EAST BAY STREET, STE. 804
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: PENLAND, S. PERRY
Address: 233 EAST BAY ST., STE 610
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: POPE, SHAWN H
Address: 233 EAST BAY STREET, STE. 615
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: ROLFE, LAWRENCE C
Address: 233 EAST BAY ST STE. 720
City-St-Zip: JACKSONVILLE, FL 32202

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL R. MCCULLOUGH

PRES

01/05/2010

Electronic Signature of Signing Officer or Director

Date