2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

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Entity Name: SECKEL-BLANCHARD, INC.

Current Principal Place of Business:

2000 EAGLE POINTE
PALM HARBOR, FL 34685

New Principal Place of Business:

2901 W. WINDPOINTE DRIVE
PEORIA, IL 61614

Current Mailing Address:

2000 EAGLE POINTE
PALM HARBOR, FL 34685

New Mailing Address:

2901 W. WINDPOINTE DRIVE
PEORIA, IL 61614

FEI Number: 37-6028832 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUNTER, SHERYL S
4808 W. LONGFELLOW AVENUE
TAMPA, FL 33629 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	SECKEL, WILLIAM P	
Address:	2000 EAGLE POINTE	
City-St-Zip:	PALM HARBOR, FL 34685	
Title:	VP	( ) Delete
Name:	SECKEL, SHARON L	
Address:	5657 VALLEY OAK DR	
City-St-Zip:	LOS ANGELES, CA 90068	
Title:	VPS	( ) Delete
Name:	HUNTER, SHERYL S	
Address:	4808 W. LONGFELLOW AVENUE	
City-St-Zip:	TAMPA, FL 33629	
Title:	VP	( ) Delete
Name:	SECKEL, SEAN P	
Address:	104415 GREENDALE	
City-St-Zip:	TAMPA, FL 33626	
Title:	D	( ) Delete
Name:	SECKEL, SANDY	
Address:	2000 EAGLE POINTE	
City-St-Zip:	PALM HARBOR, FL 34685	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	SECKEL, SEAN P	
Address:	2901 W. WINDPOINTE DRIVE	
City-St-Zip:	PEORIA, FL 61614	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	SECKEL, WILLIAM P	
Address:	2000 EAGLE POINTE	
City-St-Zip:	PALM HARBOR, FL 34685	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SHERYL S HUNTER VPS 04/10/2009
Electronic Signature of Signing Officer or Director Date