

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F07439

(5)

1. Corporation Name

BLAIR GROVES, INC.



Principal Place of Business

10219 DEWEY ROBBINS RD  
HOWEY FL 34737

Mailing Address

10219 DEWEY ROBBINS RD  
HOWEY FL 34737

3. Date Incorporated or Qualified  
12/02/1980

3a. Date of Last Report  
02/21/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

4. FEI Number

59-2056022

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLAIR, ROBERT H  
10219 ROBBINS RD  
HOWEY IN THE HILLS FL 34737

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent (see the filing instructions)

(If 301B Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
PD  
BLAIR, ROBERT H  
10219 ROBBINS RD  
HOWEY FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
STD  
BLAIR, MARION G  
10219 ROBBINS RD  
HOWEY FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
D  
BLAIR, NAN K married  
10219 ROBBINS RD  
HOWEY FL ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ DELETE

13.

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

D  
KIRTON, NAN Blair  
1205 So. Center St.  
Eastis, FLA. 32726

☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

D  
KIRTON, T.J.  
1205 So. Center St.  
Eastis, FLA. 32726

☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Signature and typed or printed name of signing officer or director  
ROBERT H. Blair

8/23/96

904-324-3518

CR2E034 (12/95)