## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F59687

Title:

Name:

Address:

City-St-Zip:

FILED May 03, 2009 Secretary of State

Entity Name: THE BLUMENAUER CORPORATION						
Current Principal Place of Business:				New Principal Place of	f Business:	
% WESLEY 2708 REW OCOEE, FL		UER				
Current Mailing Address:				New Mailing Address:		
% WESLEY C BLUMENAUER 2708 REW CIRCLE OCOEE, FL 34761						
FEI Number:	59-2149604	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
BLUMENAUER, WESLEY C. 15744 TOWER VIEW DR CLERMONT, FL 34711 US				BLUMENAUER, WESLEY C 2708 REW CIRCLE OCOEE, FL 34761 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: WESLEY C. BLUMENAUER				05/03/2009		
	Electroni	c Signature of Registered Agen	nt		Date	
		(2)(b), F.S., the corporation did not a Trust Fund Contribution ( ).	receive t	he prior notice.		
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$		
Title: Name: Address: City-St-Zip:	P () I BLUMENAUER, V 15744 TOWER V CLERMONT, FL	/IEW DR		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () I BLUMENAUER, I 2708 REW CIRC OCOEE, FL 347	CLE		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST () I BLUMENAUER, V 2708 REW CIRC OCOEE, FL 347	CLE		Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: WESLEY C. BLUMENAUER P 05/03/2009

() Delete

BLUMENAUER, VICKIE

2708 REW CIR.

OCOEE, FL 34761

(X) Change ( ) Addition

BLUMENAUER, VICKIE

CLERMONT, FL 34711

15744 TOWER VIEW DR