

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H60702

Entity Name: BLUFFS RESALES & RENTALS, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

4300 S. US HWY #1
#211
JUPITER, FL 33477 US

Current Mailing Address:

4300 S. US HWY #1
#211
JUPITER, FL 33477 US

New Principal Place of Business:

5500 MILITARY TRAIL
STE 32
JUPITER, FL 33458 US

New Mailing Address:

5500 MILITARY TRAIL
STE 32
JUPITER, FL 33458 US

FEI Number: 59-2698478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNEDAKER, CHRISTINE B P
4300 S. US HWY #1
#211
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

SNEDAKER, CHRISTINE B P
5500 MILITARY TRAIL
STE 32
JUPITER, FL 33458 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: CHRISTINE B. SNEDAKER

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SNEDAKER, CHRISTINE B P
Address: 4300 S. US HWY #1, #211
City-St-Zip: JUPITER, FL 33477 US

Title: VP () Delete
Name: SNEDAKER, FRANK C VP
Address: 4300 S. US HWY #1, #211
City-St-Zip: JUPITER, FL 33477 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SNEDAKER, CHRISTINE B P
Address: 5500 MILITARY TRAIL, STE 32
City-St-Zip: JUPITER, FL 33458 US

Title: VP (X) Change () Addition
Name: SNEDAKER, FRANK C VP
Address: 5500 MILITARY TRAIL
City-St-Zip: JUPITER, FL 33458 US

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: CHRISTINE B. SNEDAKER

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date