

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J17387

FILED
Apr 21, 2009
Secretary of State

Entity Name: BLUE CHIP ENTERPRISES, INC.

Current Principal Place of Business:

5658 UNIVERSITY BLVD. WEST
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

5658 UNIVERSITY BLVD. WEST
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-2686515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROMBERG, FRED
4925 BEACH BLVD
JACKSONVILLE, FL 32207 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: PTD () Delete
Name: CATHERWOOD, S.C.
Address: 1257 N BURGUNDY TR
City-St-Zip: JACKSONVILLE, FL 32259

Title: VSD () Delete
Name: TROMBERG, FRED
Address: 2115 LA VACA ROAD
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: S.C. CATHERWOOD

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date