## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# K77947

Entity Name: BLANCHE'S PROJECT I, INC.

FILED Oct 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O BLANCHE D. BONE C/O BLANCHE D. BONE 5088 BONE LANE 5088 BONE LANE

BROOKSVILLE, FL 34609 US

Current Mailing Address: New Mailing Address:

C/O BLANCHE D. BONE C/O BLANCHE D. BONE

5088 BONE LANE 5088 BONE LANE 5088 BONE LANE

BROOKSVILLE, FL 34609 US

FEI Number: 59-2951244 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BONE, BLANCHE D.

5088 BONE LANE

BONE, BLANCHE D

5088 BONE LANE

BROOKSVILLE, FL 34609 US BROOKSVILLE, FL 34609 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: BLANCHE D. BONE 10/17/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 BONE, BLANCHE D.,
 Name:
 BONE, BLANCHE D

 Address:
 5088 BONE LANE
 Address:
 5088 BONE LANE

City-St-Zip: BROOKSVILLE, FL 34609 US

Title: ( ) Delete Title: VP ( ) Change (X) Addition

Name: Name: REINIGER, RAYMOND T Address: Address: 5088 BONE LANE

City-St-Zip: City-St-Zip: BROOKSVILLE, FL 34609 US

I hereby certify that the information supplied with this filing does not qualify for the 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: BLANCHE D. BONE PRES 10/17/2006

Electronic Signature of Signing Officer or Director

Date

M & L Accounting Office, Inc. 5327 Commercial Way, D-120 Spring Hill, FL 34606 Phone: (352) 597-4889

Fax: (352) 597-7360

March 28, 2005

Attn: Debra
Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: Blanch

Blanches Project I, Inc.

Doc# K77947

## Dear Debra:

On Tuesday October 17, 2006 I filed an amended annual report for the above referenced corporation. Please note that the husband of the president of the corporation changed his name to match his spouse. I was unaware of this change at the time I filed the amendment. The husband's correct name is Raymond T. Bone. Please make the necessary changes to your records.

I thank you in advance for your cooperation and apologize for the inconvenience.

If you have any other questions regarding this matter, please feel free to contact me at the number above.

Respectfully,

Louis J. Maniscalco

Accountant