

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052575

Entity Name: BLANTON LLC

FILED  
Apr 29, 2006  
Secretary of State

**Current Principal Place of Business:**

2708 WEST MARLIN AVENUE  
TAMPA, FL 33611 US

**New Principal Place of Business:**

**Current Mailing Address:**

2708 WEST MARLIN AVENUE  
TAMPA, FL 33611 US

**New Mailing Address:**

FEI Number: 54-2135584

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOCKEY, CAROL M  
2708 WEST MARLIN AVENUE  
TAMPA, FL 33611 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

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: LOCKEY, RICHARD  
Address: 2708 WEST MARLIN AVENUE  
City-St-Zip: TAMPA, FL 33611

Title: VP ( ) Delete  
Name: LOCKEY, CAROL  
Address: 2708 WEST MARLIN AVENUE  
City-St-Zip: TAMPA, FL 33611

Title: ST ( ) Delete  
Name: LOCKEY, KEITH  
Address: 2708 WEST MARLIN AVENUE  
City-St-Zip: TAMPA, FL 33611

**ADDITIONS/CHANGES:**

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

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RICHARD F. LOCKEY

PRES

04/29/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date