

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2004, 08:00 AM
Secretary of State

DOCUMENT # L62430

1. Entity Name
BLACKWOOD GRINDING, INC.



Principal Place of Business

10720 TUBE DR
SUITE 1
HURST, TX 76053 US

Mailing Address

10720 TUBE DRIVE
SUITE 1
HURST, TX 76053 US

DO NOT WRITE IN THIS SPACE



02242004 No Chg-P CR2E034 (10/03)

4. FEI Number
58-1901738

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

MCCLEARY, BARRY W.
3 WEST GARDEN STREET
SUITE 380 BLOUNT BLDG.
PENSACOLA, FL 32501

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U000000089797
03/16/04-80003-013 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BLACKWOOD, PHILLIP G. 57 STONEGATE DR. BEDFORD, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST EVANS, JAMES N. 38 SHADOWBROOK LANE HURST, TX
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JAMES EVANS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES EVANS

3/12/04
Date

817-267-5691
Daytime Phone #