

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L70753

FILED
Mar 26, 2009
Secretary of State

Entity Name: BLITCH AND ASSOCIATES, INC.

Current Principal Place of Business:

280 SUNSET DRIVE
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

301 COLLEGE ST
HISTORIC MOUNTVILLE COMMUNITY
LAGRANGE, GA 302417840

New Mailing Address:

FEI Number: 59-2983484 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLITCH, LANDIS S
280 SUNSET DRIVE
BROOKSVILLE, FL 34601 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: CD () Delete
Name: BLITCH, LANDIS S
Address: 301 COLLEGE STREET
City-St-Zip: MOUNTVILLE, GA 30261

Title: PD () Delete
Name: COOK, DANIEL J
Address: 280 SUNSET DRIVE
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: BLITCH, LANDIS S
Address: 301 COLLEGE STREET
City-St-Zip: LAGRANGE, GA 302617840 US

Title: PD (X) Change () Addition
Name: COOK, DANIEL J
Address: 280 SUNSET DRIVE
City-St-Zip: BROOKSVILLE, FL 34601 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: LANDIS S. BLITCH

C/D

03/26/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date