


**\* 2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 20, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M69395</b> 1. Entity Name BLALOCK & ASSOCIATES, INC.	
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Principal Place of Business C/O MAURY J. BLALOCK, JR. 12313 WEXFORD HILLS ROAD RIVERVIEW, FL 33569	Mailing Address C/O MAURY J. BLALOCK, JR. 12313 WEXFORD HILLS ROAD RIVERVIEW, FL 33569
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04172006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2881992	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

BLALOCK, MAURY J PD  
 12313 WEXFORD HILLS ROAD  
 RIVERVIEW, FL 33569

**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

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BLALOCK JR., MAURY J. 12313 WEXFORD HILLS ROAD RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BLALOCK, SALLY L 12313 WEXFORD HILLS ROAD RIVERVIEW, FL 33569
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 05/02/06-80117-006 158.75

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an officer like empowered.

SIGNATURE: Maury J. Blalock, Jr. - President Maury J. Blalock, Jr. 4/17/06 (813) 741-9797  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #