## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M92104

Address:

City-St-Zip:

526 BUTLER STREET

WINDERMERE, FL 34786

Entity Name: BLAIR GROUP, INC.

FILED Apr 20, 2009 Secretary of State

Entity Nai	Me: BLAIR G	ROUP, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
5600 US 9	ERT YOUNG 18 NORTH SU D, FL 33809	TE 7			
Current Mailing Address:			New Mailing Address:		
5600 US 9	ERT YOUNG 18 NORTH SU D, FL 33809	TE 7			
FEI Number	: 65-0061439	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
LAKELANI	8 NORTH, SL D, FL 33809	US	ourpose of changing its registered	d office or registered agent, or both,	
	e of Florida.	odomico uno oddomene ioi une p	ourpose of offeriging its registered	a office of regionered agent, or bear,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD ( YOUNG, ROBE 526 BUTLER S WINDERMERE	ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	HARWELL, MI	GROVE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D ( YOUNG, SAND	) Delete RA C	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MICHELLE L HARWELL S 04/20/2009