2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N01000000815

Entity Name: BLESSED NATIONAL KNOWN, INC.

Current Principal Place of Business:

1441 W. 30TH ST.
RIVIERA BCH, FL 33401

New Principal Place of Business:

Current Mailing Address:

1441 W. 30TH ST.
RIVIERA BCH, FL 33401

New Mailing Address:

FEI Number: 31-1755380 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, GRIFFIN SR.
1441 W. 30TH ST.
RIVIERA BCH, FL 33401 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DAVIS, GRIFFIN SR.
Address: 1441 W. 30TH ST.
City-St-Zip: RIVIERA BCH, FL 33404

Title: SD ( ) Delete
Name: DONAWAY, ERMA J
Address: 1521 W. 13TH ST.
City-St-Zip: RIVIERA BCH, FL 33404

Title: TD ( ) Delete
Name: WILLIAMS, NATHANIEL
Address: 1805 W. BLUE HERON L103
City-St-Zip: RIVIERA BCH, FL 33404

Title: D ( ) Delete
Name: DAVIS, SYDNEY
Address: 1249 9TH ST.
City-St-Zip: RIVIERA BCH, FL 33404

Title: D ( ) Delete
Name: WILSON, KATHI
Address: 380 W. 22ND ST.
City-St-Zip: RIVIERA BCH, FL 33404

Title: D ( ) Delete
Name: DAVIS, DENZEL M
Address: 1866 W. 34TH ST.
City-St-Zip: RIVIERA BCH, FL 33404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REV. GRIFFIN DAVIS P 04/06/2009

Electronic Signature of Signing Officer or Director — Date