2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010413

Entity Name: THE BLAIR FOLINDATION INC

FILED Sep 04, 2007 Secretary of State

Littly Na	IIIE. THE BEART OUNDATION, INC.			
Current Principal Place of Business:		New Principal Place of Business:		
2809 W. E TAMPA, F	STRELLA STREET L 33629			
Current Mailing Address:		New Mailing Address:		
2809 W. E TAMPA, F	STRELLA STREET L 33629			
	ice with s. 607.193(2)(b), F.S., the corporation did not rece	-	, , , , , , , , , , , , , , , , , , , ,	
Name and	I Address of Current Registered Agent:	Name and Addre	ess of New Registered Agent:	
	S, KIMBERLY M STRELLA STREET 'L 33629 US			
	e named entity submits this statement for the purpo e of Florida.	se of changing its regi	stered office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () Delete STEBBINS, KIMBERLY M 2809 W. ESTRELLA STREET TAMPA, FL 33629	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete FRIEDMAN, JEFF 3800 W. COLONNADE PARKWAY, SUITE 650 BIRMINGHAM, AL 35243	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete SALTZMAN, RENEE G 3926 VERSAILLES DRIVE TAMPA, FL 33634	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete DEMARINES, ERIN 533 SOUTH HOWARD AVENUE, #41, BLDG #8 TAMPA, FL 33606	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete MIRANDA, FRANK 703 W. SWANN AVENUE TAMPA, FL 33606	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	D () Delete KELESKE, JOSHUA 423 S, HYDE PARK AVENUE	Title: Name: Address:	() 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: KIMBERLY M. STEBBINS DIR 09/04/2007

TAMPA, FL 33606

City-St-Zip: