

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000018276

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** HILAMAN'S BLADE RUNNER'S INC.

**Current Principal Place of Business:**

8314 INVERNESS DRIVE  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 180747  
TALLAHASSEE, FL 32318

**New Mailing Address:**

**FEI Number:** 59-3629937

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILAMAN, THOMAS K  
8314 INVERNESS DRIVE  
TALLAHASSEE, FL 32312 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:** P  
**Name:** HILAMAN, THOMAS K  
**Address:** 8314 INVERNESS DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32312

**Title:** S  
**Name:** HILAMAN, PATTI  
**Address:** 8314 INVERNESS DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32312

I hereby 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 all other like empowered.

**SIGNATURE:** THOMAS K HILAMAN

OWNE

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date