

**FILED**  
**Apr 17, 2003 8:00 am**  
**Secretary of State**

04-17-2003 90159 034 \*\*\*150.00

**FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P600000 30414  
 1. Entity Name  
Blair Services Company ✓



**DO NOT WRITE IN THIS SPACE**

**10075717**

2. Principal Place of Business  
3074 Windmoor Dr.  
 Suite, Apt. #, etc.

3. Mailing Address  
3074 Windmoor Dr.  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Palm Harbor FL  
 Zip  
34685 Country  
Pinellas

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4. FEJ Number  
593637030 Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE  
 IN THIS SPACE**

7. Name and Address of Current Registered Agent  
 Name Robert W. Ruser  
 Street Address (P.O. Box Number is Not Acceptable)  
3074 Windmoor Dr.  
 City Palm Harbor FL Zip Code 34685

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

January 1 - May 1 Fee is \$150.00  
 After May 1, Fee is \$550.00  
 Amended UBR is \$61.25  
 Make Check Payable to Florida Department of State

9. Election Campaign Financing  
 Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President / Treasurer</u> <u>Robert W. Ruser</u> <u>3074 Windmoor Dr.</u> <u>Palm Harbor FL 34685</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Robert W. Ruser  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-03 Date 727-771-7871 Daytime Phone #

CR2E0348 (12/02)