## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000078000

8137 NORTH MAIN STREET

JACKSONVILLE, FL 32208

Address:

City-St-Zip:

FILED Jan 16, 2009 Secretary of State

Entity Na	me: THE BLA	CKSMITH MARINE CORPC	RATION				
Current Principal Place of Business:				New Principal Place of Business:			
SUITE B	TH MAIN STR VILLE, FL 322						
Current Mailing Address:				New Mailing Address:			
437 EAST MONROE STREET SUITE 202 JACKSONVILLE, FL 32202				8137 N. MAIN STREET SUITE B JACKSONVILLE, FL 32208			
FEI Number	: 42-1557148	FEI Number Applied For ( )	FEI Nur	nber Not Appl	licable ( )	Certificate of Status	Desired ( )
Name and	Address of (	Current Registered Agent:		Name and	Address of	New Registered Ag	jent:
437 EAST SUITE 202	MICHAEL L MONROE ST 2 WILLE, FL 322						
	named entity e of Florida.	submits this statement for the	e purpose o	of changing i	ts registered	office or registered a	agent, or both,
SIGNATU	RE:						
	Electro	nic Signature of Registered A	gent			Date	
Election Car	mpaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BROOKS, MIC	NROE STREET, SUITE 202		Title: Name: Address: City-St-Zip:	D () BLACK, LONN 49 BICKFORD PALM COAST	DRIVE	
Title:	P ( WEISMAN DA	) Delete		Title: Name	(	) Change ( ) Addition	

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

SIGNATURE: DAVID WEISMAN P 01/16/2009