



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90347 023 ***150.00

DOCUMENT # P01000085413 1. Entity Name BLOUNT COMMUNICATIONS CORPORATION					
Principal Place of Business 6040 N W 43RD TERRACE BOCA RATON, FL 33432				Mailing Address 6040 N W 43RD TERRACE BOCA RATON, FL 33432	
2. Principal Place of Business 824 E Atlantic Ave Suite, Apt. #, etc. Suite 7 City & State Delray Beach FL Zip 33483		3. Mailing Address 824 E Atlantic Ave Suite, Apt. #, etc. Suite 7 City & State Delray Beach FL Zip 33483			
4. FEI Number 11-3358426		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				02282005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent BLOUNT, GREGORY JAMES 6040 N W 43RD TERRACE BOCA RATON, FL 33432			7. Name and Address of New Registered Agent Name Blount, Gregory James Street Address (P.O. Box Number is Not Acceptable) 824 E Atlantic Avenue Suite Suite 7 City Delray Beach FL Zip Code 33483		
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 <u><i>[Signature]</i></u> President DATE 4/21/05 <small>Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLOUNT, GREGORY JAMES 6040 N W 43RD TERRACE BOCA RATON, FL 33432	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Blount, Gregory James 824 E Atlantic Avenue #7 Delray Beach, FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BLOUNT, TRICIA 6040 N W 43RD TERRACE BOCA RATON, FL 33432	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Blount, Gregory James 824 E Atlantic Avenue #7 Delray Beach, FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>[Signature]</i></u> GREGORY J. BLOUNT <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 4/21/05 Daytime Phone # 5619998930		