

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000095409

Entity Name: BLAYDE DEVELOPMENT, INC.

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

159 N. CENTRAL AVENUE
STE. L
OVIEDO, FL 32765

Current Mailing Address:

PO BOX 195208
WINTER SPRINGS, FL 32719

New Principal Place of Business:

3625 STATE ROAD 419
STE 130
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 59-3747761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIPLETT, WILLIAM R
159 N. CENTRAL AVENUE
STE. L
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

TRIPLETT, WILLIAM R
3625 STATE ROAD 419
STE 130
WINTER SPRINGS, FL 32708 US

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: WILLIAM R TRIPLETT

05/01/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TRIPLETT, WILLIAM R
Address: 910 N. JERICO DRIVE
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TRIPLETT, WILLIAM R
Address: 1211 DEER RUN
City-St-Zip: WINTER SPRINGS, FL 32708

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: WILLIAM R TRIPLETT

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date