

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000042861

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**Entity Name:** HOUSE OF BLUEPRINTS, INC

**Current Principal Place of Business:**

4965 E. COUNTY HWY. 30-A  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

4965 E. COUNTY HWY. 30-A  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 75-3046154

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UHLFELDER, DANIEL W  
3092 W. COUNTY ROAD 30A  
SANTA ROSA BEACH, FL 32459 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

**OFFICERS AND DIRECTORS:**

**Title:** C  
**Name:** BARRETT, JEFF T  
**Address:** 193 LAKE POINTE DRIVE  
**City-St-Zip:** SANTA ROSA BEACH, FL 32459

**Title:** C  
**Name:** BARRETT, ALI  
**Address:** 193 LAKE POINTE DRIVE  
**City-St-Zip:** SANTA ROSA BEACH, FL 32459

**Title:** D  
**Name:** UHLFELDER, STEVEN J  
**Address:** 2519 HARRIMAN CIRCLE  
**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:** JEFF BARRETT

C

03/25/2011

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

\_\_\_\_\_  
Date