

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90197 040 ***150.00

DOCUMENT # P02000126530

1. Entity Name
LARRY BLEVINS, P.A.



Principal Place of Business
~~1728~~ **KINGSLEY AVE 1536**
~~190~~ **116**
ORANGE PARK, FL 32073

Mailing Address
P.O. BOX 8820 1536 Kingsley Ave
FLEMING ISLAND, FL 32006 Ste 116
Orange Park, FL 32073



04132006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
37-1449903

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BLEVINS, LARRY J
740 TARA FARMS DR
MIDDLEBURG, FL 32068

**DO NOT WRITE
IN THIS SPACE**

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 *Larry Blevins*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/06

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BLEVINS, LARRY J
STREET ADDRESS	3684 BALTUSROL CT 740 Tara Farms Dr.
CITY-ST-ZIP	GREEN COVE SPRINGS, FL 32043 Middleburg FL 32068
TITLE	ST
NAME	BLEVINS, MARSHA C
STREET ADDRESS	3684 BALTUSROL CT 740 Tara Farms Dr.
CITY-ST-ZIP	GREEN COVE SPRINGS, FL 32043 Middleburg, FL 32068
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Larry Blevins*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-06
Date

904-264-2274
Daytime Phone #