

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056847

FILED
Apr 08, 2009
Secretary of State

Entity Name: BLUE RIBBON RESIDENTIAL, INC.

Current Principal Place of Business:

2459 CHENEY HWY #62
TITUSVILLE, FL 32780

New Principal Place of Business:

2459 CHENEY HWY
62
TITUSVILLE, FL 32780

Current Mailing Address:

2459 CHENEY HWY #62
TITUSVILLE, FL 32780

New Mailing Address:

2459 CHENEY HWY
62
TITUSVILLE, FL 32780

FEI Number: 90-0112487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHILLING, MELODY
2459 CHENEY HWY #62
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

SCHILLING, MELODY W MS.
2459 CHENEY HWY
62
TITUSVILLE, FL 32780 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: MELODY SCHILLING

04/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHILLING, MELODY
Address: 2459 CHENEY HWY #62
City-St-Zip: TITUSVILLE, FL 32780

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SCHILLING, MELODY W MS.
Address: 2459 CHENEY HWY #62
City-St-Zip: TITUSVILLE, FL 32780

Title: PRES () Change (X) Addition
Name: SCHILLING, MELODY W MS.
Address: 4470 BURKHOLM ROAD
City-St-Zip: MIMS, FL 32754

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: MELODY SCHILLING

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

Date