## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000138982

FILED Apr 03, 2009 Secretary of State

Entity Name: BLAIR SURFACE RESTORATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 2162 HWY 97 SOUTH CANTONMENT, FL 32533 **Current Mailing Address: New Mailing Address:** 2172 W NINE MILE RD 2172 W NINE MILE RD PENSACOLA, FL 32534 PENSACOLA, FL 32534 FEI Number: 54-2140503 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BLAIR, JOHN P 2162 HWY 97 SOUTH CANTONMENT, FL 32533 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change ( ) Addition BLAIR, JEFFERY L BLAIR, JEFFERY L Name: Name: 837 MERLIN TERRACE 10300 AILERON AVE., LOT 4 Address: Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: PENSACOLA, FL 32506

Title: VTS () Delete Title: () Change () Addition

Name: BLAIR, JOHN P Name: 2162 HWY 97 SOUTH Address: Address: CANTONMENT, FL 32533 City-St-Zip: City-St-Zip:

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: JOHN PATRICK BLAIR **VTS** 04/03/2009