

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 02, 2004 8:00 am**  
**Secretary of State**

07-02-2004 90003 028 \*\*\*150.00

DOCUMENT # P04000001516

1. Entity Name  
BLAKEMAN & ASSOCIATES CONSTRUCTION, INC.



*Never Received Mailings @ Address*  
Principal Place of Business  
427 PURITAN ROAD  
#202  
WEST PALM BEACH, FL 33405

Mailing Address  
427 PURITAN ROAD  
#202  
WEST PALM BEACH, FL 33405

J4000000



2. Principal Place of Business  
*956 30th St*

3. Mailing Address  
*956 30th St*

06272004 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
*West Palm Beach, FL*

City & State  
*West Palm Beach, FL*

4. FEI Number  
*200557883*

Applied For  
Not Applicable

Zip  
*33407*

Country  
*Palm Beach*

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YEEND, JOHN  
1109 SOUTH CONGRESS AVE  
WEST PALM BEACH, FL 33406

Name  
*Sky Blakeman*  
Street Address (P.O. Box Number is Not Acceptable)  
*956 30th St*

City  
*West Palm Beach* FL Zip Code  
*33407*

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 *Sky Blakeman* DATE *6-25-04*

Signature (Typed or Printed name of registered agent next to it if applicable)

(NOTE: Registered Agent signature required when renewing)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 8, 2004**

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

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BLAKEMAN, SKY 427 PURITAN ROAD #202 WEST PALM BEACH, FL 33405	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Sky Blakeman 956 30th St West Palm Beach, FL 33407	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Sky Blakeman* DATE *6-25-04*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #