

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 23, 2007 8:00 am**  
**Secretary of State**

02-23-2007 90041 013 \*\*\*150.00

DOCUMENT # P04000118666

1. Entity Name

FLOYD BLANK REALTY COMPANY



Principal Place of Business

1200 S. FLAGLER DR  
606  
WEST PALM BEACH FL 33401

Mailing Address

1200 S. FLAGLER DR  
606  
WEST PALM BEACH FL 33401

2. Principal Place of Business - No P.O. Box #

801 S. OLIVE AVE

Suite/Apt. #, etc.

1609

3. Mailing Address

801 S. OLIVE AVE

Suite/Apt. #, etc.

1609

City & State

WEST PALM BEACH FL

City & State

WEST PALM BEACH FL

Zip

33401

Country

P.B.

Zip

33401

Country

P.B.

4. FEI Number

20-1720318

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BLANK, FLOYD P  
1200 S. FLAGLER DR  
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name

BLANK FLOYD P

Street Address (P.O. Box Number is Not Acceptable)

801 S OLIVE AVE SUITE 1609

City

WEST PALM BEACH FL

Zip Code

33401

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

FLOYD P BLANK

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

(NOTE: Registered Agent signature required when reinstating)

*Floyd P. Blank*

1/28/07

3/18/07

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME BLANK, FLOYD P  
STREET ADDRESS 1200 S. FLAGLER DR  
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☒ Delete

TITLE S/T  
NAME PINECOURT, P. KENNETH JR  
STREET ADDRESS 1270 NORTH LAKE WAY  
CITY-ST-ZIP PALM BEACH FL 33480 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P.D.  
NAME BLANK FLOYD P.  
STREET ADDRESS 801 S. OLIVE AVE SUITE 1609  
CITY-ST-ZIP WEST PALM BEACH FL ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Floyd P. Blank Pres.*

Date

Daytime Phone #

1/28/07 561-  
3/18/07 - 3109858