

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000031593

Entity Name: BLOW ME AWAY, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

37025 FRAZEE HILL ROAD
DADE CITY, FL 33523

New Principal Place of Business:

36620 TRINA ROAD
DADE CITY, FL 33523

Current Mailing Address:

37025 FRAZEE HILL ROAD
DADE CITY, FL 33523

New Mailing Address:

36620 TRINA ROAD
DADE CITY, FL 33523

FEI Number: 20-2425465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWNELL, CASSANDRA
37025 FRAZER HILL RD
DADE CITY, FL 33523 US

Name and Address of New Registered Agent:

BROWNELL, CASSANDRA
36620 TRINA ROAD
DADE CITY, FL 33523 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:

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWNELL, CASSANDRA K
Address: 36636 AUDREY RD
City-St-Zip: DADE CITY, FL 33523

Title: VP () Delete
Name: HAYDEN, KATHY A
Address: 36636 AUDREY RD
City-St-Zip: DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWNELL, CASSANDRA K
Address: 36620 TRINA ROAD
City-St-Zip: DADE CITY, FL 33523

Title: VP (X) Change () Addition
Name: HAYDEN, KATHY A
Address: 24398 LANARK ROAD
City-St-Zip: BROOKSVILLE, FL 34601

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: CASSANDRA K BROWNELL

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date