

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146527

FILED
Apr 18, 2007
Secretary of State

Entity Name: SIGNATURE BLESSINGS, INCORPORATED

Current Principal Place of Business:

10400 SAN JOSE BLVD.
10
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

Current Mailing Address:

5558 COASTAL LN N
JACKSONVILLE, FL 32258 US

New Mailing Address:

10400 SAN JOSE BLVD
10
JACKSONVILLE, FL 32257 US

FEI Number: 20-4163371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUPLESSIS, ROSA M
5558 COASTAL LN N
JACKSONVILLE, FL FL US

Name and Address of New Registered Agent:

DUPLESSIS, ROSA M
10400 SAN JOSE BLVD
10
JACKSONVILLE, FL 32257 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: ROSA M DUPLESSIS

04/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUPLESSIS, ROSA M
Address: 5558 COASTAL LN N
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: VP () Delete
Name: WASHINGTON, TONYA
Address: 11742 TORTOISE WAY N
City-St-Zip: JACKSONVILLE, FL 32218 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DUPLESSIS, ROSA M
Address: 10400 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: VP (X) Change () Addition
Name: WASHINGTON, TONYA R
Address: 10400 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSA M DUPLESSIS

P

04/18/2007

Electronic Signature of Signing Officer or Director

Date