

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000101444

Entity Name: BLANKENSHIP & PASTEUR, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

1541 NE 22ND AVE  
OCALA, FL 34470

## New Principal Place of Business:

4750 S. PINE AVE  
OCALA, FL 34480

## Current Mailing Address:

1541 NE 22ND AVE  
OCALA, FL 34470

## New Mailing Address:

P. O. BOX 6390  
OCALA, FL 34478

FEI Number: 51-0596528

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLANKENSHIP, ROBERT W  
5400 NE 5TH STREET  
OCALA, FL 34470 US

## Name and Address of New Registered Agent:

BLANKENSHIP, ROBERT W  
4750 S. PINE AVE  
OCALA, FL 34480 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:

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BLANKENSHIP, ROBERT W  
Address: 5400 NE 5TH STREET  
City-St-Zip: Ocala, FL 34470

Title: D ( ) Delete  
Name: PASTEUR, JAMES M  
Address: 8824 NE 20TH TERRACE  
City-St-Zip: ANTHONY, FL 32617

Title: D ( ) Delete  
Name: BLANKENSHIP, LANA A TREASUR  
Address: 5400 NE 5TH STREET  
City-St-Zip: Ocala, FL 34470

Title: D ( ) Delete  
Name: PASTEUR, ELIZABETH SECRETA  
Address: 8824 NE 20TH TERRACE  
City-St-Zip: ANTHONY, FL 32617

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BLANKENSHIP, ROBERT W  
Address: 4750 S. PINE AVE  
City-St-Zip: Ocala, FL 34480

Title: VP (X) Change ( ) Addition  
Name: PASTEUR, JAMES M  
Address: 4750 S. PINE AVE  
City-St-Zip: Ocala, FL 34480

Title: T (X) Change ( ) Addition  
Name: BLANKENSHIP, LANA A  
Address: 4750 S. PINE AVE  
City-St-Zip: Ocala, FL 34480

Title: S (X) Change ( ) Addition  
Name: PASTEUR, ELIZABETH  
Address: 4750 S. PINE AVE  
City-St-Zip: Ocala, FL 34480

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: LANA A BLANKENSHIP

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04/29/2009

Electronic Signature of Signing Officer or Director

Date