

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000039482

FILED
Feb 07, 2009
Secretary of State

Entity Name: BLUE FOG INTERPRISES, INC.

Current Principal Place of Business:

106 S SINGLETON AVENUE
TITUSVILLE, FL 32796

New Principal Place of Business:

236 MAPLE PL
TITUSVILLE, FL 32780

Current Mailing Address:

106 S SINGLETON AVENUE
TITUSVILLE, FL 32796

New Mailing Address:

236 MAPLE PL
TITUSVILLE, FL 32780

FEI Number: 26-2638235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRECHT, HELLA
106 S SINGLETON AVENUE
TITUSVILLE, FL 32796 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MACHINTOSH, ROBERT
Address: 106 S SINGLETON AVENUE
City-St-Zip: TITUSVILLE, FL 32796

Title: VD () Delete
Name: BRECHT, HELLA
Address: 106 S SINGLETON AVENUE
City-St-Zip: TITUSVILLE, FL 32796

Title: STD () Delete
Name: MACHINTOSH, VIRGINIA
Address: 106 S SINGLETON AVENUE
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MACINTOSH, ROBERT
Address: 236 MAPLE PL.
City-St-Zip: TITUSVILLE, FL 32780

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: MACINTOSH, VIRGINIA M
Address: 236 MAPLE PL
City-St-Zip: TITUSVILLE, FL 32780

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: ROBERT G MACINTOSH

PD

02/07/2009

Electronic Signature of Signing Officer or Director

_____ Date