

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000007324

FILED  
May 04, 2010  
Secretary of State

**Entity Name:** JAMES BLACKMAN INSURANCE GROUP, INC.

**Current Principal Place of Business:**

6919 WEST BROWARD BLVD  
# 123  
PLANTATION, FL 33317 US

**New Principal Place of Business:**

**Current Mailing Address:**

6919 WEST BROWARD BLVD  
# 123  
PLANTATION, FL 33317 US

**New Mailing Address:**

FEI Number: 26-4108139

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BLACKMAN, JAMES E  
6919 WEST BROWARD BLVD  
# 123  
PLANTATION, FL 33317 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BLACKMAN, JAMES E  
Address: 801 NE 199TH ST # 205  
City-St-Zip: MIAMI, FL 33179 US

I hereby 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 all other like empowered.

SIGNATURE: JAMES E BLACKMAN

P

05/04/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date