

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000004757

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** BLACKBURN SURVEYING, INC.

**Current Principal Place of Business:**

642 WEST HWY 50  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 121022  
CLERMONT, FL 34712 US

**New Mailing Address:**

**FEI Number:** 59-3150747

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KELLEY, PATRICK  
12207 KIJIK TRAIL  
GROVELAND, FL 34736 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KELLEY, PATRICK M.  
Address: 12207 KIJIK TRAIL  
City-St-Zip: GROVELAND, FL 34711 US

Title: S  
Name: KELLEY, LYNN C.  
Address: 12207 KIJIK TRAIL  
City-St-Zip: GROVELAND, FL 34711 US

Title: P  
Name: KELLEY, PATRICK  
Address: 12207 KIJIK TRAIL  
City-St-Zip: GROVELAND, FL 34711 US

Title: P  
Name: KELLEY, PATRICK  
Address: 12207 KIJIK TRAIL  
City-St-Zip: GROVELAND, FL 34711 US

Title: P  
Name: KELLEY, PATRICK  
Address: 12207 KIJIK TRAIL  
City-St-Zip: GROVELAND, FL 34711 US

Title: P  
Name: KELLEY, PATRICK  
Address: 12207 KIJIK TRAIL  
City-St-Zip: GROVELAND, FL 34711 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:** PATRICK KELLEY

PRES

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date