

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000008601

Entity Name: BLACKSWORD ARMOURY, INC.

FILED  
Apr 15, 2007  
Secretary of State

## Current Principal Place of Business:

22516 E CR1474  
HAWTHORNE, FL 32640 US

## New Principal Place of Business:

## Current Mailing Address:

22516 E CR1474  
HAWTHORNE, FL 32640 US

## New Mailing Address:

FEI Number: 59-3163495

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANGELL, JON  
22516 EAST CR. 1474  
HAWTHORNE, FL 32640 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: PSTM ( ) Delete  
Name: ANGELL, JON  
Address: 22516 E CR 1474  
City-St-Zip: HAWTHORNE, FL 32640 US

Title: STM ( ) Delete  
Name: ANGELL, JON  
Address: 22516 E CIR 1474  
City-St-Zip: HAWTHORNE, FL 32640 US

Title: VP ( ) Delete  
Name: WESTERMAN, JOANNE  
Address: 5911 BELLONA AVE.  
City-St-Zip: BALTIMORE, MD 21212 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T ( ) Change (X) Addition  
Name: PARROTT, ANTHONY T  
Address: 417 OAK COURT  
City-St-Zip: CATONSVILLE, MD 21228

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: JON ANGELL

P

04/15/2007

Electronic Signature of Signing Officer or Director

Date