## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000061186

Entity Name: BLUE CREEK FOLIAGE, INC.

FILED Apr 30, 2009 Secretary of State

Littly Na	ille. BLOE CI	REENT OLIAGE, INC.			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
24130 GOBBLER RD. ASTOR, FL 32102			1885 STONE RD PIERSON, FL 3218	1885 STONE RD PIERSON, FL 32180	
Current M	lailing Addre	ss:	New Mailing Addre	New Mailing Address:	
P.O. BOX ASTOR, F			P.O.BOX 446 ASTOR, FL 32102		
FEI Number	: 59-3202638	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	RE LANE L 32102 U		purpose of changing its registe	red office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( REEDY, CHRI 1885 STONE I PIERSON, FL	RD.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPS ( REEDY, TIFFA 1885 STONE I PIERSON, FL	RD.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: CHRISTOPHER B. REEDY P 04/30/2009