

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P96000028289

Entity Name: BLUE HOLE, INC.

**FILED**  
**Jun 19, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

400 N LOXAHATCHEE DR  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

400 N LOXAHATCHEE DR  
JUPITER, FL 33458

**New Mailing Address:**

FEI Number: 65-0660224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HOFMEISTER, SCOTT  
400 N LOXAHATCHEE DR  
JUPITER, FL 33458 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: D ( ) Delete  
Name: HOFMEISTER, SCOTT  
Address: 400 N LOXAHATCHEE DR  
City-St-Zip: JUPITER, FL 33458

Title: T ( ) Delete  
Name: HOFMEISTER, VICKIE  
Address: 400 N. LOXAHATCHEE DR  
City-St-Zip: JUPITER, FL 33458

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: HOFMEISTER, SCOTT C  
Address: 400 N LOXAHATCHEE DR  
City-St-Zip: JUPITER, FL 33458

Title: S (X) Change ( ) Addition  
Name: HOFMEISTER, VICKIE A  
Address: 400 N. LOXAHATCHEE DR  
City-St-Zip: JUPITER, FL 33458

Title: V ( ) Change (X) Addition  
Name: HOFMEISTER, JESSE S  
Address: 400 N LOXAHATCHEE DRIVE  
City-St-Zip: JUPITER, FL 33458

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: VICKIE HOFMEISTER

S

06/19/2007

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

\_\_\_\_\_  
Date