


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000076592</b>	
1. Entity Name <b>BLAKEACRES, INC.</b>	

Principal Place of Business <b>2430 S FEDERAL HWY # 8 BOYNTON BEACH, FL 33435 US</b>	Mailing Address <b>P.O. BOX 2727 CRYSTAL RIVER, FL 34423-2727 US</b>
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03032006 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-0698610</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>BLAKE, RODNEY R JR. 2430 S FEDERAL HWY #8 BOYNTON BEACH, FL 33435</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Rodney R Blake Jr* RODNEY R BLAKE JR 3/10/2006  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>03/21/06-80068 022 150.00</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BLAKE, RODNEY R. J 2430 S FEDERAL HWY #8 CRYSTAL RIVER, FL 34429 <i>Boynnton Beach FL 33435</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FAULKNER, BETTY JO 3301 PERSIMMON LANE FRISCO, TX 75034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WILDERMUTH, HELEN 865 E. MCCLOSKEY-SCHOOL RD. SIDNEY, OH 45355
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BLAKE, JANICE 7375 BALFOURE CT. 4E DUBLIN, OH 43017
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rodney R Blake Jr* RODNEY R BLAKE JR 3/10/2006 937 638 0348  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #