

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 19, 2002 8:00 am
Secretary of State

08-19-2002 90126 048 ***150.00

DOCUMENT # P97000024213

1. Entity Name
BLAKE MANAGEMENT, INC.

975221

Principal Place of Business 6746 FINAMORE CIRCLE LAKE WORTH FL 33467	Mailing Address 6746 FINAMORE CIRCLE LAKE WORTH FL 33467
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2. Principal Place of Business 17610 128th Trail North Suite, Apt. #, etc.	3. Mailing Address 17610 128th Trail North Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Jupiter FL	City & State Jupiter, FL	4. FEI Number 65-0741970	Applied For <input type="checkbox"/> Not Applicable
Zip 33478	Country Palm Beach	Zip 33478	Country Palm Beach

6. Name and Address of Current Registered Agent BOARDMAN, ELLIOT 6746 FINAMORE CIRCLE LAKE WORTH FL 33467	7. Name and Address of New Registered Agent Name Boardman, Elliot Street Address (P.O. Box Number is Not Acceptable) 17610 128th Trail North City Jupiter FL Zip Code 33478
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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 *Elliot Boardman* DATE 7.14.02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOARDMAN, ELLIOT B. 6746 FINAMORE CIRCLE LAKE WORTH FL 33467 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 17610 128th Trail North Jupiter, FL 33478
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MULLIN, PATRICIA B. 6746 FINAMORE CIRCLE LAKE WORTH FL 33467 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 17610 128th Trail North Jupiter, FL 33478
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *SPGIBTMAD REQUIRED* DATE 7.14.02 DAYTIME PHONE # 561/575.4269

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)