

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004372

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: BLACK AND BLUE PRODUCTIONS, INC.

**Current Principal Place of Business:**

7801 LONESTAR ROAD  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

**Current Mailing Address:**

7801 LONESTAR ROAD  
JACKSONVILLE, FL 32211

**New Mailing Address:**

FEI Number: 59-3489988

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FAULKNER, WALTER F  
7801 LONESTAR ROAD  
JACKSONVILLE, FL 32211 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: VP ( ) Delete  
Name: BARDEN, DONALD  
Address: 7032 BERRY AVE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: P ( ) Delete  
Name: FAULKNER, WALTER  
Address: 331 LAURINA ST #623  
City-St-Zip: JACKSONVILLE, FL 32216

Title: T ( ) Delete  
Name: BARDEN, CONNIE  
Address: 7032 BERRY AVE  
City-St-Zip: JACKSONVILLE, FL 32211

**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:

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: WALTER F. FAULKNER

P

03/24/2009

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

\_\_\_\_\_  
Date