2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P9900006717 1. Entity Name BLANKENSHIP ENTERPRISES OF PINELLAS COUNTY, INC.

6. Name and Address of Current Registered Agent

Country

Principal Place of Business

Mailing Address

7304 -56TH ST.

Zip

SIGNATURE:

7304 -56TH ST.

PINELLAS PARK FL 33781

PINELLAS PARK FL 33781

2. Principal Place of Business 3. Mailing Address SAME Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Zip

FILED Jan 09, 2002 8:00 am Secretary of State 01-09-2002 90017 023 ***150.00



DO NOT WRITE IN THIS SPACE

7JAN2002 545-8680

59-2974185

7. Name and Address of New Registered Agent

Applied For

\$8.75 Additional

Not Applicable

4. FEI Number

5. Certificate of Status Desired

			Name	Name				
BLANKENSHIP, CHARLES D 7304 -56TH ST.				Street Address (P.O. Box Number is Not Acceptable)				
	PARK FL 33781				*****			1
	•		City		F	Zip Cod	le	1
8. The above	e named entity submits this statement for the st	antensky	gistered office of			E		
9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) FILE NOW!!! After May 1, 2002 Make Check Payable			Fee will be \$5	will be \$550.00 Trust Fund Contribution Added		0 May Be d to Fees		
11.	OFFICERS AND D	RECTORS	12.	AD	DITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLANKENSHIP, CHARLES D 1525 21ST STREET S.W 739 LARGO FL 34640	□ Delete 2456 ⁷⁶ 571 ~866888663	TITLE NAME STREET ADDRESS 300 61 Alp	1634	kenship,Charles I Balmoral Dr rwater,Fl.33756	☐ Change	Addition	CR2E034 (9/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete ·	TITLE NAME STREET ADDRESS CFTY-ST-ZIP			☐ Change	Addition	8
TITLE -NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>.</u> .		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
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IIIulcated	certify that the information supplied with the on this report or supplemental report is triporation or the receiver or trustee empower.	ue and accurate and that my s	signature shall ha	ive the same li	enal effect as it made under oath: that	I am an officer	or director 1	

Country