

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040617

Entity Name: BLACK SMITH COVE, INC.

FILED
Feb 10, 2005
Secretary of State

Current Principal Place of Business:

2900 NE STREET 14TH STREET
#608
POMPANO BEACH, FL 33062

New Principal Place of Business:

Current Mailing Address:

2900 NE STREET 14TH STREET
#608
POMPANO BEACH, FL 33062

New Mailing Address:

FEI Number: 65-0916627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACKBURN, WALTER P
2900 NE STREET 14TH STREET
#608
POMPANO BEACH, FL 33062 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: P () Delete
Name: BLACKBURN, WALTER
Address: 2900 NE STREET 14TH STREET, #608
City-St-Zip: POMPANO BEACH, FL 33062

Title: SVP () Delete
Name: SMITH, LINDA F
Address: 2900 NE STREET 14TH STREET, #608
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: BLACKBURN, WALTER P
Address: 2900 NE STREET 14TH STREET, #608
City-St-Zip: POMPANO BEACH, FL 33062

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LINDA F. SMITH

MS

02/10/2005

Electronic Signature of Signing Officer or Director

Date