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FILED
Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S83738 (2)

1. Corporation Name
BLACKSTONE & CARNEY, P.A.



Principal Place of Business

Mailing Address

7655 WEST GULF TO LAKE HWY.
SUITE 2
CRYSTAL RIVER FL 34429
US

7655 WEST GULF TO LAKE HWY.
SUITE 2
CRYSTAL RIVER FL 34429-7910
US

3. Date Incorporated or Qualified
09/30/1991

3a. Date of Last Report
03/11/1996

2. Principal Place of Business

2a. Mailing Address

21 4969 N. RAINBRIAR PATH
Suite, Apt. #, etc.

26 4969 N. RAINBRIAR PATH
Suite, Apt. #, etc.

4. FEI Number

Applied For

59-3089070

Not Applicable

22 City & State

27 City & State

23 CRYSTAL RIVER, FL

28 CRYSTAL RIVER, FL

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24 Zip

Country

29 Zip

Country

34428

34428

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLACKSTONE, J. MICHAEL
7655 WEST GULF TO LAKE HWY.
SUITE 2
CRYSTAL RIVER FL 32629

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4969 N. RAINBRIAR PATH

83

84 City

CRYSTAL RIVER

FL

85 Zip Code
34428

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person named as registered agent (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME BLACKSTONE, J. MICHAEL
STREET ADDRESS 7655 W. GULF TO LAKE HWY
CITY-ST-ZIP CRYSTAL RIVER FL

☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME BLACKSTONE, LAYNE LOWERY
STREET ADDRESS 4969 RAINBRIAR PATH
CITY-ST-ZIP CRYSTAL RIVER FL

☐ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME BLACKSTONE, JOHN HANSE
STREET ADDRESS 2116 SULLIVAN RD.
CITY-ST-ZIP HUNTSVILLE AL

☐ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0436648

CR2E034 (9/96)