


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 22, 2005 8:00 am
Secretary of State

07-22-2005 90022 007 ***150.00

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| DOCUMENT # V09656 1. Entity Name BLAKE INVESTMENT CORP. |  |
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| Principal Place of Business 731 N. JACKSON STREET, STE.400 MILWAUKEE, WI 53202 | Mailing Address 731 N. JACKSON STREET STE. 400 MILWAUKEE, WI 53202 |
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50057138



06292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

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|------------------------------------|--|
| 4. FEI Number 65-0315125 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent BLAKE, WILLIAM J. 452 HIGH STREET BOCA RATON, FL 33432 |
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**DO NOT WRITE
IN THIS SPACE**

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

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| FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
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| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | O BLAKE, WILLIAM J. <i>deceased</i> 7860 N. RIVER ROAD RIVER HILLS, WI 53217 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS BLAKE, PATRICIA R. 7860 N. RIVERS ROAD RIVER HILLS, WI 53217 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BLAKE, W. SCOTT 7860 NORTH CLUB CIRCLE FOX POINT, WI 53217 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GRANT, PAMELA B. 6209 N BERKLEY BLVD MILWAUKEE, WI 53211 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BLAKE, TIMOTHY 452 HIGH STREET BOCA RATON, FL 33432 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

W. J. Blake
7/13/05 414-272-2200