

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000008888

**Entity Name:** BLACKPOOL ASSOCIATES, INC.

**Current Principal Place of Business:**

1700 NW 66 AVE  
SUITE 102  
PLANTATION, FL 33313

**Current Mailing Address:**

1700 NW 66 AVE  
SUITE 102  
PLANTATION, FL 33313 US

**FEI Number:** 65-0561737

**Certificate of Status Desired:** No

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

MURPHY, WILLIAM M  
1700 NW 66 AVE  
SUITE 102  
PLANTATION, FL 33313 US

*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

**Officer/Director Detail :**

|                 |                     |                 |                             |
|-----------------|---------------------|-----------------|-----------------------------|
| Title           | PDST                | Title           | VP                          |
| Name            | MURPHY, WILLIAM M   | Name            | MURPHY, KATE                |
| Address         | 1700 NW 66 AVE #102 | Address         | 1700 NW 66 AVE<br>SUITE 102 |
| City-State-Zip: | PLANTATION FL 33313 | City-State-Zip: | PLANTATION FL 33313         |

*I hereby 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 all other like empowered.*

**SIGNATURE:** WILLIAM MURPHY

**PRESIDENT**

**04/22/2019**

Electronic Signature of Signing Officer/Director Detail

Date