

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000180595

Entity Name: BLAIR MACHINE AND TOOL LLC**Current Principal Place of Business:**8665 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32256**Current Mailing Address:**8665 PHILLIPS HIGHWAY
JACKSONVILLE, FL 32256 82**FEI Number:** 82-2575561**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LANCASTER, JOSEPH M
8665 PHILIPS HIGHWAY
JACKSONVILLE, FL 32256 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**Authorized Person(s) Detail :**

Title	CEO
Name	LANCASTER, JOSEPH L
Address	10135 EAST US HIGHWAY 92
City-State-Zip:	TAMPA FL 33610

Title	PRES
Name	LANCASTER, JOSEPH M
Address	8665 PHILLIPS HIGHWAY
City-State-Zip:	JACKSONVILLE FL 32256

Title	VP
Name	LANCASTER, MARK A
Address	10135 EAST US HIGHWAY 92
City-State-Zip:	TAMPA FL 33610

Title	VP
Name	LANCASTER, STEVEN D
Address	10135 EAST US HIGHWAY 92
City-State-Zip:	TAMPA FL 33610

Title	SEC
Name	YOUNG, JEANNIE M
Address	10135 EAST US HIGHWAY 92
City-State-Zip:	TAMPA FL 33610

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH M LANCASTER

PRESIDENT

01/15/2018

Electronic Signature of Signing Authorized Person(s) Detail_____
Date