FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 742327

BLACKBURN SHORES HOMEOWNERS' ASSOCIATION, INC.

| Principal Place of Busines |
|----------------------------------------|
| 412 WATERSIDE LANE NOKOMIS FL 34275 |
| IIC |

2. Principal Place of Business

Suite, Apt. #, etc.

Titu P State

21

22

Mailing Address

412 WATERSIDE LANE NOKOMIS FL 34275

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

FILED Mar 04, 1999 8:00 am § Secretary of State

03-04-1999 90005 033 ****61.25

Applied For

\$8.75 Additional

Not Applicable

3. Date incorporated or Qualifed

04/10/1978

65-0393047

4. FEI Number

| Zip Country Zip Country Zip Country S.5.00 May Be Added to Fees S. Name and Address of Current Registered Agent S. Name and Address of Name Registered Agent S. Name CALANDRA MICHAEL S. Name CALANDRA MICHAEL S. Name CALANDRA MICHAEL S. Name CALANDRA MICHAEL S. Name Calandra Michael Name Caland | 23 | 9 | 28 | | 5. Certifcate of Status Desired | Fee Required | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------|-----------------------|---------------------------------|---------------------------------------|--|--|
| 9. Name and Address of Current Registered Agent State CALANDRA CALANDR | Zip | | Zip | Country | ' ' ' 11 | , , | | |
| REICHEL DAVID K 410 WATERSIDE LANE NOKOMIS TL 04275 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporations board of directors, I hereby accept the appointment—as 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 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 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 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 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 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 directors. I hereby accept the appointment—as registered directors, I hereby accept the appointment—as registered directors. I hereby accept the appointment—as registered directors. I hereby accept the appointment—as registered directors. I here | | | | <u> </u> | | | | |
| RECHEL DAYID K 10 Pursuant to the provisions of Sections 617 0502 and 617 1508. Fiorida Statutes, the above-named corporation shorted for 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 acceptable explagations of Jection 617 0503. Florida Statutes, the above-named corporation abover to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation abover to the provision of the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named corporation abover to the provision and the purpose of changing its registered agent. I am, familiar with, and acceptable objection 617 0503. Florida Statutes, the above-named corporation abover to the provisions of changing its registered agent. I am, familiar with, and acceptable objection 617 0503. Florida Statutes, the above-named corporation abover to the purpose of changing its registered agent. I am, familiar with, and acceptable objective of change was authorized by the corporation to brad of directors. I hereby accept the appointment as registered agent. I am, familiar with, and acceptable objective of change and above-named corporations board of directors. I hereby accept the appointment as registered agent. I am, familiar with, and acceptable objective of directors. I hereby accept the appointment as registered agent. I am, familiar with, and, acceptable objectives of directors. I hereby accept the purpose of changing its registered agent. I am, familiar with, and, acceptable objectives of directors. I hereby accept the purpose of changing its registered agent. I am, familiar with, and, acceptable objectives of directors. I hereby acceptable ob | | | | 81 Nam | 10 AALAAIDDA MAAILAEL | <u></u> | | |
| ### 10 WATERSIDE LANE NOKOMIS FL 34275 11. Pursuant to the provisions of Sections 817,0502 and 617,1508, Florida Statutues, the above-named corporation submits this statement for the purpose of changing its 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, and familiar with, nade, accept, the obligations of Assection 617,0502 and 617,1508, Florida Statutues, the above-named corporation submits this statement for the purpose of changing its registered agent. The purpose of changing its registered agent of the purpose of changing its registered agent. The purpose of changing its registered agent and familiar with a statement for the purpose of changing its registered agent. The purpose of changing its registered agent and familiar with a statement for the purpose of changing its registered agent. The purpose of changing its registered agent and familiar was a registered agent. The purpose of changing its registered agent and familiar was a registered agent. The purpose of changing its reg | DETOLIE | DAIRD IC | | - | | | | |
| NOKOMIS FL 94275 85 34 27 5 84 City NOKOMIS FL 85 34 27 5 34 27 5 84 City NOKOMIS FL 85 34 27 5 34 27 5 84 City NOKOMIS FL 85 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 27 5 34 2 | | | | 82 Stree | | | | |
| THE HOPE NOKOMIS FL 34275 11. Pursuant to the provisions of Sactions 617 0502 and 617 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered spent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered spent and fire in appears a company of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the appointment as a registered of the corporation's board of directors. I hereby accept the appointment as registered of the corporation's board of directors. I hereby accept the corporation's board of directors. I hereby accept the corporation' | | | | 83 | TVS WHIERSIDE LINE | · · · · · · · · · · · · · · · · · · · | | |
| 11. Piersuant to the provisions of Sections 617.0502 and 617.1508, Florids 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. Statutes about horse of weak authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in the familian with, and accept the obligations of Section 617.0503, Florida Statutes. SIGNATURE | -NOKOMIS | -1 L-34275 | | | | | | |
| 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, or hold, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as 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, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. In 12 agents and in the special such as a | | | | | | | | |
| SIGNATURE | 11 Durament to the provinces of Sections 617 0502 and 617 1508 Florida Statutes, the above-named comporation submits this statement for the purpose of changing its registered | | | | | | | |
| SIGNATURE | 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. Lab familiar with, and accept the obligations of Section 617.0503. Florida Statutes. | | | | | | | |
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE TD | MICHAEL CALANDRA TREASURER 1-21-99 | | | | | | | |
| TITLE | SIGNATURE | Signature, typed or printed name of registered agent ar | nd title if applicable. (NOTE: Reg | istered Agent signatu | | | | |
| TRECHEL, DAVID K- | 12. | OFFICERS AND | | 13. | | | | |
| 13 STREET ADDRESS | TITLE | TD - | 🔀 DELETE | 1.1 TITLE | TD | Change X Addition | | |
| TITLE | NAME | REIGHEL, DAVID-K | | 1.2 NAME | CALANDRA, MICHAEL_ | | | |
| TITLE | STREET ADDRESS | 410 WATERSIDE LANE | | 1.3 STREET ADDRES | S 403 WATERSIDE LANE | • | | |
| TITLE | CITY-ST-ZIP | NOKOMIS FL- | | 1.4 CITY-ST-ZIP | NOKOMIS, FL 34275 | | | |
| CITY-ST-ZIP NOKOMIS FL 34-275 NOKOMIS FL 34-275 | TITLE | DP - | ▼ D€LETE | 2.1 TITLE | 7 | 1 Change DY Addition | | |
| CITY-ST-ZIP NOKOMIS FL 34-275 NOKOMIS FL 34-275 | NAME | -KOZAK; ANTON | | 2.2 NAME | WILCOX, DONALD | | | |
| TITLE | STREET ADDRESS | 400 WATERSIDE LANE | | 2.3 STREET ADDRES | S 412 WATERSIDE DING | • | | |
| NAME | CITY-ST-ZIP | NOKOMIS FL | | 2. 4 CITY-ST-ZIP | NOKOMIS, FL 34275 | | | |
| STREET ADDRESS 409 WATERSIDE LANE OKKOMIS FL 34275 TITLE D- NAME WASSENAAR, DEBBIE STREET ADDRESS 408 WATERSIDE LANE OKTY-ST-ZIP NOKOMIS FL 34275 TITLE D- NOKOMIS FL 34275 TITLE D- NOKOMIS FL 34275 TITLE D- DELETE D- DELET | TITLE | -D- | ☐ D€LETE | 3.1 TITLE | DY | Change | | |
| TITLE D | NAME | HAACK, LLOYD | | 3.2 NAME | | | | |
| TITLE D- WASSENAAR, DEBBIC- 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS ADD WATERSIDE LANE- 4.4 CITY-ST-ZIP NOKOMIS FL 34-275 TITLE DW- DELETE 5.1 TITLE 5.3 STREET ADDRESS AVERTAGE | STREET ADDRESS | 409 WATERSIDE LANE | | 3.3 STREET ADDRES | ss | | | |
| NAME WASSENAAR, DEBBIC STREET ADDRESS CITY-ST-ZIP NOKOMIS FL 94275 TITLE DY NAME STREET ADDRESS CITY-ST-ZIP NOKOMIS FL DELETE S1 TITLE DY NOKOMIS FL DELETE S1 TITLE S2 TITLE S3 STREET ADDRESS S1 TITLE S1 TITLE S2 TITLE S3 STREET ADDRESS S1 TITLE S2 TITLE S3 STREET ADDRESS S1 TITLE S1 TITLE S2 TITLE S2 TITLE S3 STREET ADDRESS S1 TITLE S1 TITLE S2 TITLE S2 TITLE S3 STREET ADDRESS S1 TITLE S2 TITLE S3 STREET ADDRESS S1 TITLE S1 TITLE S2 TITLE S1 TITLE S2 TITLE S1 TITLE S1 TITLE S2 TITLE S1 TITLE S2 TITLE S1 TITLE S1 TITLE S2 TITLE S1 TITLE S2 TITLE S1 TITLE S2 TITLE S2 TITLE S3 STREET ADDRESS S1 TITLE S2 TITLE S3 STREET ADDRESS S1 TITLE S3 STREET ADDRESS S1 TITLE | CITY-ST-ZIP | NOKOMIS FL 34275 | | 3.4. CITY-ST-ZIP | | | | |
| STREET ADDRESS 408 WATERSIDE LANE- | TITLE | D- | K) DELETE | 4.1 TITLE | D | Change X Addition | | |
| A CITY-ST-ZIP | NAME | Wassenaar, Debbic- | | 4.2 NAME | BEIDASH , DONALD | | | |
| TITLE DY- DELETE 5.1 TITLE 5.2 NAME STREET ADDRESS CITY-ST-ZIP NOKOMIS FL 5.4 CITY-ST-ZIP NOKOMIS FL 5.4 CITY-ST-ZIP TITLE DS DELETE 6.1 TITLE NAME FIORETTI, ANN 6.2 NAME STREET ADDRESS 411 WATERSIDE LANE 6.3 STREET ADDRESS STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS | STREET ADDRESS | 408 WATERSIDE LANE- | | 4.3 STREET ADDRES | | | | |
| NAME | CITY-ST-ZIP | NOKOMIS FL 34275 | | 4.4 CITY-ST-ZIP | | | | |
| STREET ADDRESS STREET ADDRESS STREET ADDRESS | TITLE | -DV | ☐ ĐĒLETĒ | | DP ' | Change | | |
| STREET ADDRESS 421 WATERSIDE LANE 5.4 CITY-ST-ZIP 5.5 CITY-ST-ZIP 6.1 TITLE 5.5 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRE | NAME | JANE REBILD | | 5.2 NAME | | | | |
| TITLE DS DELETE 6.1 TITLE NAME FIORETTI, ANN 6.2 NAME STREET ADDRESS 411 WATERSIDE LANE 6.3 STREET ADDRESS 6.3 STREET ADDRESS | STREET ADDRESS | 421 WATERSIDE LANE | | 5.3 STREET ADDRES | SS | | | |
| NAME FIORETTI, ANN 6.2 NAME STREET ADDRESS 411 WATERSIDE LANE 6.3 STREET ADDRESS | CITY-ST-ZIP | NOKOMIS FL | | | | ····· | | |
| STREET ADDRESS 411 WATERSIDE LANE 6.3 STREET ADDRESS | TITLE | DS | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition | | |
| STREET ADDRESS 411 WATERSIDE LANE 6.3 STREET ADDRESS 6.3 STREET ADDRESS | NAME | FIORETTI, ANN | | 6.2 NAME | | | | |
| CITY-ST-ZIP NOKOMIS FL 34275 64 CITY-ST-ZIP | STREET ADDRESS | | | 6.3 STREET ADORES | ss | | | |
| | CITY-ST-ZIP | NOKOMIS FL 34275 | | 6.4 CITY-ST-ZIP | | | | |

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.