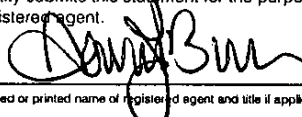
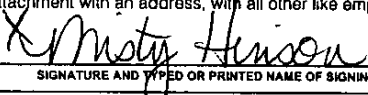


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 8:00 am
Secretary of State

03-07-2008 90034 046 ****61.25

DOCUMENT # N06000008545 1. Entity Name BLACKWATER OAKS HOMEOWNERS ASSOCIATION, INC.																																																																																																														
Principal Place of Business 120 ALLAMANDA DRIVE LAKELAND, FL 33803			Mailing Address 120 ALLAMANDA DRIVE LAKELAND, FL 33803																																																																																																											
2. Principal Place of Business - No P.O. Box # 121 Raintree Ct		3. Mailing Address PO Box 95																																																																																																												
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																												
City & State Auburndale FL		City & State Auburndale FL		4. FEI Number APPLIED FOR 208899172																																																																																																										
Zip 33823		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																										
6. Name and Address of Current Registered Agent CLARKSON, KEITH 120 ALLAMANDA DRIVE LAKELAND, FL 33803			7. Name and Address of New Registered Agent Name David L Burman Street Address (P.O. Box Number is Not Acceptable) 121 Raintree Ct City Auburndale FL Zip Code 33823																																																																																																											
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 30%; text-align: center;"> 2-5-08 <small>DATE</small> </div> <div style="width: 30%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> </div>																																																																																																														
Filing Fee is \$61.25 Due by May 1, 2008			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																											
Make check payable to Florida Department of State																																																																																																														
<div style="display: flex;"> <div style="flex: 1;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">PD CLARKSON, KEITH</td> <td style="width: 20%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">120 ALLAMANDA DRIVE</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">LAKELAND, FL 33803</td> </tr> <tr> <td>TITLE</td> <td>VD LINTZ, FRED</td> <td style="text-align: center;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">120 ALLAMANDA DRIVE</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">LAKELAND, FL 33803</td> </tr> <tr> <td>TITLE</td> <td>STD CASTANET, LISA</td> <td style="text-align: center;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">120 ALLAMANDA DRIVE</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">LAKELAND, FL 33803</td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="flex: 1;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">VD Misty Hinson</td> <td style="width: 20%; text-align: center;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">5060 Lunn Rd Lakeland FL 33823</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>STD Lucas Martin</td> <td style="text-align: center;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">5060 Lunn Rd Lake/and FL 33811</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	PD CLARKSON, KEITH	<input type="checkbox"/> Delete	STREET ADDRESS	120 ALLAMANDA DRIVE		CITY-ST-ZIP	LAKELAND, FL 33803		TITLE	VD LINTZ, FRED	<input checked="" type="checkbox"/> Delete	STREET ADDRESS	120 ALLAMANDA DRIVE		CITY-ST-ZIP	LAKELAND, FL 33803		TITLE	STD CASTANET, LISA	<input checked="" type="checkbox"/> Delete	STREET ADDRESS	120 ALLAMANDA DRIVE		CITY-ST-ZIP	LAKELAND, FL 33803		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE	VD Misty Hinson	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	STREET ADDRESS	5060 Lunn Rd Lakeland FL 33823		CITY-ST-ZIP			TITLE	STD Lucas Martin	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	STREET ADDRESS	5060 Lunn Rd Lake/and FL 33811		CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, 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:  Misty Hinson 2-8-08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																														

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