

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742327

**Entity Name:** BLACKBURN SHORES HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Feb 08, 2013**  
**Secretary of State**  
**CC6569550046**

**Current Principal Place of Business:**

403 WATERSIDE LANE  
NOKOMIS, FL 34275

**Current Mailing Address:**

403 WATERSIDE LANE  
NOKOMIS, FL 34275 US

**FEI Number: 65-0393047**

**Certificate of Status Desired: No**

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

CALANDRA, MICHAEL J  
403 WATERSIDE LN  
NOKOMIS, FL 34275 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 TD  
Name CALANDRA, MICHAEL  
Address 403 WATERSIDE LN  
City-State-Zip: NOKOMIS FL 34275

Title PD  
Name ALICO, TOM  
Address 410 WATERSIDE LANE  
City-State-Zip: NOKOMIS FL 34275

Title VPD  
Name PINKHAM, MELISSA  
Address 409 WATERSIDE LANE  
City-State-Zip: NOKOMIS FL 34275

Title SD  
Name CHRISTOFFEL, BETH  
Address 401 WATERSIDE LANE  
City-State-Zip: NOKOMIS FL 34275

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL J CALANDRA**

**TREASURER**

**02/08/2013**

Electronic Signature of Signing Officer/Director Detail

Date