

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005754

FILED
Mar 16, 2009
Secretary of State

Entity Name: BLACKBURN HARBOR MASTER ASSOCIATION, INC.

Current Principal Place of Business:

2477 STICKNEY PT RD
118A
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

2477 STICKNEY PT RD
118A
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 65-1080416 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS PROPERTY MANAGEMENT
2477 STICKNEY PT RD
STE 118A
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: TURNER, MICHAEL
Address: 220 DUTCHER RD
City-St-Zip: QUEENSTOWN, MS 32658

Title: P () Delete
Name: LOMBARDI, GENE
Address: 4202 JESSIE HARBOR DRIVE
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: LYLE, LINDELL
Address: 7302 JESSIE HARBOR DRIVE
City-St-Zip: OSPREY, FL 34229

Title: VP () Delete
Name: MAYNARD, DON
Address: 1201 JESSIE HARBOR DR
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: TURNER, MICHAEL
Address: 220 DUTCHER RD
City-St-Zip: QUEENSTOWN, MS 32658

Title: P (X) Change () Addition
Name: MAYNARD, DON
Address: 1201 JESSIE HARBOR DRIVE
City-St-Zip: OSPREY, FL 34229

Title: TD (X) Change () Addition
Name: WEST, ROB
Address: 3204 JESSIE HARBOR DRIVE
City-St-Zip: OSPREY, FL 34229

Title: SD (X) Change () Addition
Name: HOFMEISTER, LARRY
Address: 338 CAICOS DR
City-St-Zip: PUNTA GORDA, FL 33950

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DON MAYNARD

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date