

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90224 002 ****61.25

DOCUMENT # N00000005756	
1. Entity Name BLACKBURN HARBOR CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business C/O CONDOMINIUM MGMT, INC 1801 GLENGARY STREET SARASOTA, FL 34231	Mailing Address C/O CONDOMINIUM MGMT, INC 1801 GLENGARY STREET SARASOTA, FL 34231
--	--

2. Principal Place of Business <i>Progressive Community Mgmt, Inc</i> Suite, Apt. #, etc. <i>1801 Glengary Street</i> City & State <i>Sarasota, FL</i> Zip <i>34231</i> Country <i>USA</i>	3. Mailing Address <i>Progressive Community Mgmt, Inc</i> Suite, Apt. #, etc. <i>1801 Glengary Street</i> City & State <i>Sarasota, FL</i> Zip <i>34231</i> Country <i>USA</i>
---	---

01222004 Chg-NP CR2E037 (10/03)

4. FEI Number 65-1044471	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CONDOMINIUM MANAGEMENT, INC. 1801 GLENGARY STREET SARASOTA, FL 34231-3603

7. Name and Address of New Registered Agent Name <i>Progressive Community Management, Inc.</i> Street Address (P.O. Box Number is Not Acceptable) <i>1801 Glengary Street</i> City <i>Sarasota</i> FL Zip Code <i>34231</i>
--

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.

SIGNATURE *[Signature]* **Jim Markel** **4/15/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEST, ROB 3204 JESSIE HARBOR DR OSPREY, FL 34229 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DAVIS, SAM S 3201 JESSIE HARBOR DR OSPREY, FL 34229 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DELAVIE, DAN G 3203 JESSIE HARBOR DR OSPREY, FL 34229 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS CLARK, P. RICHARD 1801 GLENGARY STREET SARASOTA, FL 342313603 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS markel, Jim 1801 Glengary Street Sarasota FL 34231 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT Sutton, William 1801 Glengary Street Sarasota FL 34231 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 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: *[Signature]* **4/15/04** **941-921-5393**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #