

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90017 010 ****61.25

DOCUMENT # N00000005756

1. Entity Name

BLACKBURN HARBOR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

4202 JESSIE HARBOR DR.
OSPREY FL 34229

Mailing Address

4202 JESSIE HARBOR DR.
OSPREY FL 34229



2. Principal Place of Business - No P.O. Box #

2477 Stickney Pt Rd
Suite Apt. #, etc.
118A

3. Mailing Address

2477 Stickney Pt. Rd.
Suite Apt. #, etc.
118A

1st MOORE

CR2E037 (10/07)

City & State

Sarasota

City & State

Sarasota

4. FEI Number

65-1044471

Applied For

Not Applicable

Zip

FL

Country

US

Zip

FL

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOMBARDI, GENE
4202 JESSIE HARBOR DR.
OSPREY FL 34229

7. Name and Address of New Registered Agent

Name

ARGUS PROPERTY MANAGEMENT

Street Address (P.O. Box Number is Not Acceptable)

2477 Stickney Pt Rd

Suite

118A

City

Sarasota

FL

Zip Code

34231

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, typed or printed name of registered agent and title if applicable.

(NOTE: New Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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	STD	<input type="checkbox"/> Delete
NAME	WEST, ROB	
STREET ADDRESS	3204 JESSIE HARBOR DR	
CITY - ST - ZIP	OSPREY FL 34229	
TITLE	D	<input type="checkbox"/> Delete
NAME	PRZYWARA, JOANNE	
STREET ADDRESS	3104 JESSIE HARBOR DR	
CITY - ST - ZIP	OSPREY FL 34229	
TITLE	VD	<input type="checkbox"/> Delete
NAME	DELAVIE, DAN G	
STREET ADDRESS	3203 JESSIE HARBOR DR	
CITY - ST - ZIP	OSPREY FL 34229	
TITLE	PD	<input type="checkbox"/> Delete
NAME	LOMBARDI, GENE	
STREET ADDRESS	4202 JESSIE HARBOR DRIVE	
CITY - ST - ZIP	OSPREY FL 34229	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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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STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Gene Lombardi

3/3/08