2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008011

FILED Apr 05, 2005 Secretary of State

Entity Name: THE BLAIKIE COURT CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3350 OLD OAK DR. 7269 BEE RIDGE ROAD SARASOTA, FL 34239 SARASOTA, FL 34241

Current Mailing Address: New Mailing Address:

 3350 OLD OAK DR.
 7269 BEE RIDGE ROAD

 SARASOTA, FL 34239
 SARASOTA, FL 34241

FEI Number: 65-1093060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JOHNSON, ROBERT L PRESIDE

3350 OLD OAK DR.

SARASOTA, FL 34239 US

HAMILTON, TEMPLETON B PRESIDE

7269 BEE RIDGE ROAD

SARASOTA, FL 34241 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: TEMPLETON HAMILTON 04/05/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PRES () Delete
 Title:
 PRES (X) Change () Addition

 Name:
 JOHNSON, ROBERT L
 Name:
 HAMILTON, TEMPLETON B PRESIDE

 Address:
 3350 OLD OAK DR.
 Address:
 7269 BEE RIDGE ROAD

City-St-Zip: SARASOTA, FL 34239 City-St-Zip: SARASOTA, FL 34241

Title: VT () Delete Title: () Change () Addition

 Name:
 HAMILTON, TEMP B JR.
 Name:

 Address:
 5824 BEE RIDGE RD.
 Address:

 City-St-Zip:
 SARASOTA, FL 34233
 City-St-Zip:

Title: SECR () Delete Title: () Change () Addition

 Name:
 LEE, STEVEN
 Name:

 Address:
 8140 BLAIKIE COURT. UNIT E
 Address:

 City-St-Zip:
 SARASOTA, FL 34240
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 KNEPP, TERRY
 Name:

 Address:
 R R 2, BOX 542
 Address:

 City-St-Zip:
 MONTGOMORY,, ID 47588
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TEMPLETON HAMILTON PRES 04/05/2005