

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005947

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** BLACKFIN LANDING CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8213 BLAIE COURT  
SARASOTA, FL 34240

**New Principal Place of Business:**

**Current Mailing Address:**

8213 BLAIE COURT  
SARASOTA, FL 34240

**New Mailing Address:**

**FEI Number:** 26-0358914

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SKOKOS, PETER Z ESQ.  
1819 MAIN STREET  
SUITE 610  
SARASOTA, FL 34236 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:** DP  
**Name:** BLAIE, ROBIN M  
**Address:** 8213 BLAIE COURT  
**City-St-Zip:** SARASOTA, FL 34240

**Title:** DVPS  
**Name:** BLAIE, MICHAEL B  
**Address:** 8213 BLAIE COURT  
**City-St-Zip:** SARASOTA, FL 34240

**Title:** T  
**Name:** BLAIE, MICHAEL B  
**Address:** 8213 BLAIE COURT  
**City-St-Zip:** SARASOTA, FL 34240

**Title:** D  
**Name:** LEINS, SHAWN  
**Address:** 6320 TOWER LANE  
**City-St-Zip:** SARASOTA, FL 34240

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:** ROBIN M. BLAIE

DP

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date