

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 02, 2007 8:00 am**  
**Secretary of State**

03-02-2007 90013 001 \*\*\*\*61.25

**DOCUMENT # N93000002176**

1. Entity Name  
**THE BLACKHAWK PROPERTY OWNERS' ASSOCIATION,  
INC.**



Principal Place of Business  
**5645 STRAND BLVD.  
NAPLES, FL 34110 US**

Mailing Address  
**5645 STRAND BLVD.  
NAPLES, FL 34110 US**

**40027700**



02052007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0662381</b>	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**CONROY, J T III  
2210 VANDERBILT BEACH ROAD  
SUITE 201  
NAPLES, FL 34109**

**DO NOT WRITE  
IN THIS SPACE**

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: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	GLOBETTI, JOHN C
STREET ADDRESS	5645 STRAND BLVD.
CITY - ST - ZIP	NAPLES, FL 34110

TITLE	D
NAME	TYRE, RONALD C
STREET ADDRESS	5645 STRAND BLVD.
CITY - ST - ZIP	NAPLES, FL 34110

TITLE	D
NAME	STRAUSBAUGH, TODD
STREET ADDRESS	7601 KNIGHTWING CIR.
CITY - ST - ZIP	FORT MYERS, FL 33912

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**2/27/07 239/597-1120**