

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N06899

**Entity Name:** BLAIRSTONE FOREST COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

719 E PARK AVE  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

POST OFFICE BOX 13089  
TALLAHASSEE, FL 32317 US

**FEI Number:** 59-2577731

**Certificate of Status Desired:** No

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

MCKEE, KAYLA  
719 E PARK AVE  
TALLAHASSEE, FL 32301 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:** KAYLA MCKEE

07/29/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP	Title	MANAGEMENT
Name	VOORHIES, BETSY	Name	MCKEE, KAYLA
Address	POST OFFICE BOX 13089	Address	719 E PARK AVE
City-State-Zip:	TALLAHASSEE FL 32317	City-State-Zip:	TALLAHASSEE FL 32301
Title	DIRECTOR	Title	TREASURER
Name	PRIEST, TRACIE	Name	BRAND, MARY
Address	POST OFFICE BOX 13089	Address	POST OFFICE BOX 13089
City-State-Zip:	TALLAHASSEE FL 32317	City-State-Zip:	TALLAHASSEE FL 32317
Title	PRESIDENT		
Name	WILLES, KAREN		
Address	POST OFFICE BOX 13089		
City-State-Zip:	TALLAHASSEE FL 32317		

*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:** KAYLA MCKEE

MANAGEMENT FIRM

07/29/2024

Electronic Signature of Signing Officer/Director Detail

Date