

1.) CORPORATION NAME:

Blackbaud, Inc.

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1597261**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	180,000,000
PREFER	20,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2000 DANIEL ISLAND DRIVE

CITY/ST/ZIP: CHARLESTON, SC 29492

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	MARC E CHARDON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRES/CEO		
ADDRESS:	2000 DANIEL ISLAND DRIVE		
CITY/ST/ZIP/CO:	CHARLESTON, SC 29492		

NAME:	ANTHONY BOOR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/CFO		
ADDRESS:	2000 DANIEL ISLAND DRIVE		
CITY/ST/ZIP/CO:	CHARLESTON, SC 29492		

NAME:	JON OLSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/GC		
ADDRESS:	2000 DANIEL ISLAND DR		
CITY/ST/ZIP/CO:	CHARLESTON, SC 29492		

NAME:	ANDREW LEITCH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2000 DANIEL ISLAND DRIVE		
CITY/ST/ZIP/CO:	CHARLESTON, SC 29492		

NAME:	TOM GRIFFIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	2000 DANIEL ISLAND DRIVE		
CITY/ST/ZIP/CO:	CHARLESTON, SC 29492		

NAME:	GEORGE ELLIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2000 DANIEL ISLAND DRIVE		
CITY/ST/ZIP/CO:	CHARLESTON, SC 29492		

NAME: TIMOTHY CHOU TITLE: DIRECTOR ADDRESS: 2000 DANIEL ISLAND DRIVE CITY/ST/ZIP/CO: CHARLESTON, SC 29492	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID GOLDEN TITLE: DIRECTOR ADDRESS: 2000 DANIEL ISLAND DRIVE CITY/ST/ZIP/CO: CHARLESTON, SC 29492	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: SARAH NASH TITLE: DIRECTOR ADDRESS: 2000 DANIEL ISLAND DRIVE CITY/ST/ZIP/CO: CHARLESTON, SC 29492	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JOYCE M NELSON TITLE: DIRECTOR ADDRESS: 2000 DANIEL ISLAND DRIVE CITY/ST/ZIP/CO: CHARLESTON, SC 29492	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ ANTHONY BOOR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ANTHONY BOOR, VP/CFO PRINTED NAME AND CORPORATE TITLE	7/31/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		