2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750911

FILED Jan 08, 2009 Secretary of State

Entity Name: HARBORTOWN CONDOMINIUM ASSOCIATION OF THE LANDINGS, INC.

Current Principal Place of Business: New Principal Place of Business: % BENSON'S INC 12650 WHITEHALL DR FT MYERS, FL 33907 **New Mailing Address: Current Mailing Address:** % BENSON'S, INC 12650 WHITEHALL DR FT MYERS, FL 33907 US FEI Number: 59-1963003 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: VANDALL, BONITA D 12650 WHITEHALL DR US FORT MYERS, FL 33907 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SHEA, JACK ROSSANO, GERALD Name: Name: 5022 HARBORTOWN LN Address: 4758 HARBORTOWN LN Address: City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919 (X) Change () Addition Title: SD Title: SD () Delete DALTON, BOB Name: DALTON, ROBERT Name: Address: 4755 HARBORTOWN LN Address: 4755 HARBORTOWN LN City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919 Title: VD. () Delete Title: () Change () Addition MCBRIDE, WILLIAM Name: Name: 5041 HARBORTOWN LN Address: Address: City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: Title: () Delete Title: () Change () Addition DUNLAP, TERRY Name: Name: 4980 DOCKSIDE DRIVE #102 Address: Address: City-St-Zip: FT MYERS, FL 33919 City-St-Zip: Title: () Delete Title: PTD (X) Change () Addition ZUCKER, PAUL ZUCKER, PAUL Name: Name: 4703 HARBORTOWN LN #220 4703 HARBORTOWN LN Address: Address: City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PAUL ZUCKER PRES 01/08/2009