FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNU	NUAL REPORT Socretary of DIVISION OF COR		of State		Secretary of State		
DOCUMENT # NOO109 (1) ADAM'S LANDING ASSOCIATION, INC.							
ADAM & LANDING ADDODICTION, IND.							
Principal Place of Business Mailing Address						<u> </u>	
3001 EXECUTIVE DRIVE 3001 EXECUTIVE DRIVE SUITE 260 SUITE 260							
CLEARWATER FL 34622 CLEARWATER FL 34622-33			9	3. Date	Incorporated or Qualified 12/12/1983	3a. Date of Last Report 10/04/1996	
	lace of Business	2a. Malling Address		4. FEI N	umbor	Applied For	
21 26 Suite, Apt. #, etc.		Suite, Apt. #, etc.			59-2551237	Not Applicable \$8.75 Additional	
City & State		27 City & State	27 City & State		icate of Status Desired on Campaign Financing	Fee Hequired	
23		28		Trust	Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25		Country 80	Florid	a Statutes	ntangible tax under s. 199.032, Yes \tag No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name and Address of New Registered Agent							
CONDOMINIUM ASSOCIATES CONDOMINIUM ASSOCIATES B2 Street Address					Managemen ox Number is Nounceptable Reland Huse	<u>₹</u>	
SUITE 260 SUITE 260 SUITE 260 SUITE 260					G //OC	0, 00	
CLEARWATER FL 34622					,	FL 85 Zin Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the objections of, Section 617.0503, Florida Statutes.							
agent. I am familiar with and accept the oblightions of, Section 617.0503, Floridg Statutes. SIGNATURE 38/97							
12.	Signature, typod or printed name of registers		Registered Agent & gnature			ATE ERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE	D		Change A Addition	
NAME OFFICE ADDRESS	LEIMKUEHLER, KIRK 1508 ADAMS CIRCLE E	,	1.2 NAME		owens dams cirs.		
STREET ADDRESS	- 1 ADOO SL WARA 1		1.3 STREET ADDRESS 1.4 CHY+ST-ZIP	Langs	F133771		
TITLE -	SOCIO	L DELETE	2.1 TÜLE		T. V. P. T	Change Addition	
NAME Street address	CAUDLE, SUE ANN 1606 ADAM CIRCLE S		2.2 NAME				
CITY-ST-ZIP	LARGO FL 84841- 337	121	2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP				
TITLE	TRIPD	DELETE	3.1 TITLE	···· - · · ·		Change	
NAME	LASHER, TIMO I Ly		3.2 NAME				
STREET ADDRESS	1515 ADAMS CIRCLE'E	_	3.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	LARGO FL-94641- 3 3	27/ □ DELETE	3.4. CITY - ST - ZIP				
NAME	B_{D Kravako, richard		4.1 TITLE			Change Addition	
STREET ADDRESS	1664 ADAMS CIRCLE S		4. 2 NAME 4.3 STREET ADDRESS				
CITY - ST - ZIP	LARGO FL 34041 3 3	771	4.4 CITY-ST-ZIP				
TITLE	BYD	DELETE	5.1 TITLE			Change Addition	
NAME	CLAPP, BELLE		5.2 NAME			·	
STREET ADDRESS	1630 ADAMS CIRCLE S. LARGO FL-34641 3 3	22.1	5.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	D - D	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE			Change	
NAME	ALANDER DWENS	> ====================================	6.2 NAME			r Change ☐ Addition	
STREET ADDRESS	.40.11.5 -7 - 511.3		6.3 STREET ADDRESS				
CITY-ST-ZIP			64 CITY-ST-7IP		_		
14. I do hereb	y certify that the information supply indicated on this appual report	plied with this filing does not qualify	or the exemption st	ated in Section 1	19.07(3)(i), Florida Statutes.	I further certify that the	

Information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that 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 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

FILED

Apr 08 1997 8:00am