

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03745

FILED
Mar 16, 2009
Secretary of State

Entity Name: LANDMARK PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PKWY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PKWY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-2512195 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PKWY
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: NIARHOS, THEODORE
Address: 3209 LANDMARK DR. #4404
City-St-Zip: CLEARWATER, FL 33761

Title: VPD () Delete
Name: SACKMAN, RICHARD
Address: 8201 LANDMARK DRIVE # 1203
City-St-Zip: CLEARWATER, FL 33761

Title: TD () Delete
Name: COHEN, CY
Address: 3211 LANDMARK DR#5501
City-St-Zip: CLEARWATER, FL 33761

Title: SD () Delete
Name: GIBSON, EDWARD
Address: 3205 LANDMARK DR. 3201
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: SPITZ, JOHN
Address: 3205 LANDMARK DRIVE #3205
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SPITZ, JOHN
Address: 3205 LANDMARK DR. 3205
City-St-Zip: CLEARWATER, FL 33761

Title: D (X) Change () Addition
Name: DOLCE, JOSEPH
Address: 3203 LANDMARK DRIVE #2203
City-St-Zip: CLEARWATER, FL 33761

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: THEODORE NIARHOS

Electronic Signature of Signing Officer or Director

PRES

03/16/2009

Date