

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 06, 2009  
Secretary of State**

DOCUMENT# N96000005248

**Entity Name:** EAGLES POINT AT THE LANDINGS III CONDOMINIUM ASSOCIATION, INC

**Current Principal Place of Business:**

5440 EAGLES POINT CIRCLE  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

CASEY MANAGEMENT  
4370 S. TAMIAMI TRAIL #102  
SARASOTA, FL 34231 US

**New Mailing Address:**

**FEI Number:** 65-0709668      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CASEY CONDOMINIUM MANAGEMENT  
4370 S. TAMIAMI TRAIL #156  
STE 102  
SARASOTA, FL 34231 US

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

CASEY CONDOMINIUM MANAGEMENT  
4370 S. TAMIAMI TRAIL #102  
SARASOTA, FL 34231 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:

Electronic Signature of Registered Agent

04/06/2009

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PERROT, PAUL  
Address: 5440 EAGLES POINT CIR. #305  
City-St-Zip: SARASOTA, FL 34231

Title: PD ( ) Delete  
Name: RADMAN, DAN  
Address: 5440 EAGLES POINT CIRCLE #103  
City-St-Zip: SARASOTA, FL 34231

Title: VPD ( ) Delete  
Name: SCHREIBER, EDWIN  
Address: 5440 EAGLES POINT CIRCLE #301  
City-St-Zip: SARASOTA, FL 34231

Title: STD (X) Delete  
Name: ROWEN, ROGER  
Address: 5440 EAGLES POINT CIR. #303  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: STD (X) Change ( ) Addition  
Name: ROWEN, ROGER  
Address: 5440 EAGLES POINT CIR. #303  
City-St-Zip: SARASOTA, FL 34231

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

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

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

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: ROGER ROWEN

Electronic Signature of Signing Officer or Director

STD

04/06/2009

Date