

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90335 001 ****61.25

DOCUMENT # 752441					
1. Entity Name LANDMARK TOWERS AT SAND KEY CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1230 GULF BLVD MANAGEMENT OFFICE CLEARWATER, FL 33767			Mailing Address 1230 GULF BLVD MANAGEMENT OFFICE CLEARWATER, FL 33767		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	04032008 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-2033389				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MAHER, TRISHA 1230 GULF BLVD. MANAGER'S OFFICE CLEARWATER, FL 33767			Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u><i>T. Maher</i></u> <i>PROPRY MGR</i> 4/22/08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MUSSELWHITE, ARLENE 1230 GULF BLVD. #1202 CLEARWATER BEACH, FL 33767	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PANNY, BOB <i>PANNY</i> 1230 GULF BLVD #502 CLEARWATER BEACH, FL 33767	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WELTZEL, JOSEPH 1230 GULF BLVD, #1908 CLEARWATER BEACH, FL 33767	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BARRINGER, PHYLLIS 6913 AQUADUCT TERRACE ODESSA, FL 33556	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DONNELLY, LEE 4412 QUAIL HOLLOW RD FORT WORTH, TX 76133	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARRINGER, PHYLLIS 6913 AQUADUCT TERRACE ODESSA, FL 33556	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARY REINHART 1230 GULF BLVD #604 CLEARWATER, FL 33767	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Arleene Musselwhite, Pres</i></u> 4/25/08 727-596-4496 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					