

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719013

FILED
Apr 21, 2009
Secretary of State

Entity Name: THE KIRK A. AND DOROTHY P. LANDON FOUNDATION, INC.

Current Principal Place of Business:

255 ALHAMBRA CIRCLE
STSE 820
MIAMI, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

255 ALHAMBRA CIRCLE
STSE 820
MIAMI, FL 33134 US

New Mailing Address:

FEI Number: 23-7148133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPPORT, KERRY
BESSEMER TRUST
801 BRICKELL AVE.
MIAMI, FL 33131 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: D () Delete
Name: STALEY, KATHLEEN A
Address: 9733 STONECREST BLVD
City-St-Zip: SAN DIEGO, CA 92123

Title: D () Delete
Name: KAAS, STEVEN
Address: 11711 N ISLAND ROAD
City-St-Zip: COOPER CITY, FL 33026

Title: D () Delete
Name: SEIFERT, DOUGLAS D
Address: 300 BEACH ROAD
City-St-Zip: JUPITER, FL 33469

Title: D () Delete
Name: SANTIAGO, ROSA
Address: 255 ALHAMBRA CIRCLE, #820
City-St-Zip: MIAMI, FL 33134

Title: D () Delete
Name: LANDON, R. KIRK
Address: 255 ALHAMBRA CIRCLE # 820
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: GUILMARTIN, NANCE
Address: 58 CHATANOOGA ROAD
City-St-Zip: IPSWICH, MA 01938

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: () Change () Addition
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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: R. KIRK LANDON

D

04/21/2009

Electronic Signature of Signing Officer or Director

Date