

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000004677

**Entity Name:** SOUTH BAY LANDING HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 20, 2015**  
**Secretary of State**  
**CC0276832702**

**Current Principal Place of Business:**

9085 SOUTH BAY DRIVE  
HAINES CITY, FL 33844

**Current Mailing Address:**

9085 SOUTH BAY DRIVE  
HAINES CITY, FL 33844

**FEI Number:** 42-1590287

**Certificate of Status Desired:** No

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

IRWIN, WILLIAM S  
9085 SOUTH BAY DRIVE  
HAINES CITY, FL 33844 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

Date

**Officer/Director Detail :**

Title PD  
Name IRWIN, WILLIAM S  
Address 9085 SOUTH BAY DRIVE  
City-State-Zip: HAINES CITY FL 33844

Title VD  
Name RICHARD, SAMUEL  
Address 9055 SOUTH BAY DR  
City-State-Zip: HAINES CITY FL 33844

Title TD  
Name RICHARD, ROSETTA  
Address 9055 SOUTH BAY DRIVE  
City-State-Zip: HAINES CITY FL 33844

Title SD  
Name IRWIN, RUTH A  
Address 9085 S BAY DR  
City-State-Zip: HAINES CITY FL 33844

*I hereby 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 all other like empowered.*

**SIGNATURE:** WILLIAM S. IRWIN

**PRESIDENT**

**02/20/2015**

Electronic Signature of Signing Officer/Director Detail

Date