

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

DOCUMENT# N07078

**Entity Name:** LANDMARK AT POINTE WEST CONDOMINIUM ASSOCIATION,INC.

**FILED**  
**Jan 22, 2015**  
**Secretary of State**  
**CC8178930765**

**Current Principal Place of Business:**

6304 POINTE WEST BLVD  
BRADENTON, FL 34209

**Current Mailing Address:**

4301 32ND ST. W. #A-20  
BRADENTON, FL 34205 US

**FEI Number: 59-2837229**

**Certificate of Status Desired: No**

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

C&S CONDO MGMNT SERV INC  
4301 32ND STREET WEST  
SUITE A-20  
BRADENTON, FL 34205 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 VP  
Name LABOISSONNIERE, DON  
Address 4301 32ND ST W STE A-20  
City-State-Zip: BRADENTON FL 34205

Title P  
Name MCCARTHY, MIKE  
Address 4301 32ND ST W STE A-20  
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR  
Name RAWLINGS, PATTY  
Address 4301 32ND ST. W STE.A-20  
City-State-Zip: BRADENTON FL 34205

Title T  
Name ANDREWS, DALE  
Address 4301 32ND ST.W. STE. A-20  
City-State-Zip: BRADENTON FL 34209

Title SECRETARY  
Name LANCE, GAYLE  
Address 4301 32ND ST W. STE A-20  
City-State-Zip: BRADENTON FL 34205

*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: MIKE MCCARTHY**

**PRESIDENT**

**01/22/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date