

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000008254

**FILED**  
**Mar 19, 2018**  
**Secretary of State**  
**CC6017743701**

**Entity Name:** INDEPENDENCE LANDING, INC.

**Current Principal Place of Business:**

2910 KERRY FOREST PARKWAY  
D4 #231  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

2910 KERRY FOREST PARKWAY  
D4 #231  
TALLAHASSEE, FL 32309 US

**FEI Number:** 82-2792376

**Certificate of Status Desired:** Yes

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

RICHARD, ALLISON T  
6035 BOYNTON HOMESTEAD  
TALLAHASSEE, FL 32312 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 C  
Name RICHARD, ALLISON T  
Address 6035 BOYNTON HOMESTEAD  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name DUDEK, ELIZABETH  
Address 4517 KILLIMORE LN  
City-State-Zip: TALLAHASSEE FL 32309

Title D  
Name GUNTER, BART  
Address 515 S RIDE  
City-State-Zip: TALLAHASSEE FL 32303

Title D  
Name INGRAM, FED  
Address 3012 KILLEARN POINT CT  
City-State-Zip: TALLAHASSEE FL 32309

Title D  
Name KETCHAM, BRETT  
Address 706 MIDDLEBROOKS CIRCLE  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name HASTON, SHADDRICK  
Address 1618 MAHAN CENTER BLVD  
STE. 103  
City-State-Zip: TALLAHASSEE FL 32308

Title D  
Name KOLKA, KEVIN  
Address 8108 BLENHEIM LANE  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name LEONARD, DEBORAH  
Address 2615 CENTENNIAL BLVD  
STE. 200  
City-State-Zip: TALLAHASSEE FL 32308

**Continues on page 2**

*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:** DEBORAH LEONARD

**DIRECTOR**

**03/19/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name MCCOY, TONI  
Address 1300 BALL FARM RD  
City-State-Zip: QUINCY FL 32352

Title D  
Name WILSON, DENISE  
Address 4060 OAKSHIRE CT  
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR  
Name DAILY, VIRGINIA  
Address 2910 KERRY FOREST PARKWAY  
D4 #231  
City-State-Zip: TALLAHASSEE FL 32309

Title D  
Name MENDICINO, TERRY  
Address 3019 HAWKS LANDING DR  
City-State-Zip: TALLAHASSEE FL 32309

Title D  
Name GOODSON, CINDI  
Address 10426 MCCRACKEN RD  
City-State-Zip: TALLAHASSEE FL 32309