

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N17000008254

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:

GOODSON, CINDI
2910 KERRY FOREST PARKWAY
D4 #231
TALLAHASSEE, FL 32309 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: CINDI GOODSON

02/18/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title D
Name DUDEK, ELIZABETH
Address 4617 KILLIMORE LN
City-State-Zip: TALLAHASSEE FL 32309

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

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

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

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

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

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

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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

CPA

02/18/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BREWER, SCOTT
Address 5718 TOWER ROAD
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name LEACE, JOHN
Address 909 EAST PARK AVENUE
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name STAPLETON, TIM
Address 1430 PIEDMONT DRIVE, EAST
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name AUGER, STEVE
Address 1421 COVEY RIDE STREET W
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name BROWN, JON
Address 914 RAILROAD AVENUE, SUITE #6
City-State-Zip: TALLAHASSEE FL 32310

Title DIRECTOR
Name CHAMBERS, STACY DR.
Address 101 MARTIN FARMS ROAD
City-State-Zip: CRAWFORDVILLE FL 32327

Title DIRECTOR
Name BARNES, BRICE
Address 3607 MOSSY CREEK LANE
City-State-Zip: TALLAHASSEE FL 32311

Title CHAIRMAN
Name ZIFFER, GIL
Address 1448-1 TERRACE
City-State-Zip: TALLAHASSEE FL 32303

Title DIRECTOR
Name MCNEILL, CARRIE
Address 2759 MILLSTONE PLANTATION ROAD
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name BREWSTER, CAROLINE
Address 4500 BROAD HAVEN LANE
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name CATOE, VERONICA
Address 1618 MAHAN CENTER BLVED, STE 103
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name KLAY, WILLIAM EARLE
Address 3222 INDEPENDENCE COURT
City-State-Zip: TALLAHASSEE FL 32312