

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

**Jan 04, 2024**

**Secretary of State  
3215073664CC**

DOCUMENT# N17000008254

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

**Current Principal Place of Business:**

3025 SCHOOL HOUSE ROAD  
TALLAHASSEE, FL 32311

**Current Mailing Address:**

3025 SCHOOL HOUSE ROAD  
TALLAHASSEE, FL 32311 US

**FEI Number:** 82-2792376

**Certificate of Status Desired:** Yes

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

GALBAN-COUNTRYMAN, KIMBERLY  
3025 SCHOOL HOUSE ROAD  
TALLAHASSEE, FL 32311 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:** KIMBERLY GALBAN-COUNTRYMAN

01/04/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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 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

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

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

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

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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:** KIMBERLY GALBAN-COUNTRYMAN

**EXECUTIVE DIRECTOR**

01/04/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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

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 OTHER, EXECUTIVE DIRECTOR  
Name GALBAN-COUNTRYMAN, KIMBERLY  
JEANNE  
Address 3248 STORRINGTON DRIVE  
City-State-Zip: TALLAHASSEE FL 32309