## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N1700008254

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

## Name and Address of Current Registered Agent:

RICHARD, ALLISON T 6035 BOYNTON HOMESTEAD TALLAHASSEE, FL 32312 US FILED Feb 11, 2019 Secretary of State 7681557354CC

Certificate of Status Desired: Yes

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

# Officer/Director Detail :

Title	DIRECTOR	Title	D
Name	RICHARD, ALLISON T	Name	DUDEK, ELIZABETH
Address	6035 BOYNTON HOMESTEAD	Address	4517 KILLIMORE LN
City-State-Zip:	TALLAHASSEE FL 32312	City-State-Zip:	TALLAHASSEE FL 32309
Title	D	Title	D
Name	GUNTER, BART	Name	INGRAM, FED
Address	515 S RIDE	Address	3012 KILLEARN POINT CT
City-State-Zip:	TALLAHASSEE FL 32303	City-State-Zip:	TALLAHASSEE FL 32309
Title	D	Title	D
Name	KETCHAM, BRETT	Name	HASTON, SHADDRICK
Address	706 MIDDLEBROOKS CIRCLE	Address	1618 MAHAN CENTER BLVD STE. 103
City-State-Zip:	TALLAHASSEE FL 32312	City-State-Zip:	
Title	D	Title	D
Name	LEONARD, DEBORAH	Name	MCCOY, TONI
Address	2615 CENTENNIAL BLVD STE, 200	Address	1300 BALL FARM RD
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	QUINCY FL 32352

## 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

Date

Electronic Signature of Signing Officer/Director Detail

#### **Officer/Director Detail Continued :**

Title	D	Title	SECRETARY
Name	MENDICINO, TERRY	Name	WILSON, DENISE
Address	3019 HAWKS LANDING DR	Address	4060 OAKSHIRE CT
City-State-Zip:	TALLAHASSEE FL 32309	City-State-Zip:	TALLAHASSEE FL 32309
Title	TREASURER	Title	DIRECTOR
Name	GOODSON, CINDI	Name	DAILY, VIRGINIA
Address	10426 MCCRACKEN RD	Address	703 LIVE OAK PLANATION ROAD
City-State-Zip:	TALLAHASSEE FL 32309	City-State-Zip:	TALLAHASSEE FL 32312
Title	DIRECTOR	Title	DIRECTOR
Name	BREWER, SCOTT	Name	BARNES, BRICE
Address	5718 TOWER ROAD	Address	3067 MOSSY CREEK LAND
City-State-Zip:	TALLAHASSEE FL 32303	City-State-Zip:	TALLAHASSEE FL 32311
Title	DIRECTOR	Title	CHAIRMAN
Name	LEASE, JOHN	Name	ZIFFER, GIL
Address	909 EAST PARK AVENUE	Address	P O BOX 3208
City-State-Zip:	TALLAHASSEE FL 32301	City-State-Zip:	TALLAHASSEE FL 32315
Title	DIRECTOR	Title	DIRECTOR
Name	STAPLETON, TIM	Name	MCNEILL, CARRIE
Address	3036 WATERFORD DRIVE	Address	10897 LUNA POINT ROAD
City-State-Zip:	TALLAHASSEE FL 32309	City-State-Zip:	TALLAHASSEE FL 32312