

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705865

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE LANDMARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

404 SO BEACH STR
DAYTONA BCH, FL 32114 US

New Principal Place of Business:

Current Mailing Address:

404 SO BEACH STR
DAYTONA BCH, FL 32114 US

New Mailing Address:

FEI Number: 59-2073683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YAEGER, MARGARET H
404 S. BEACH STREET
APT 1202
DAYTONA BCH, FL 32114 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SHEWMAKER, MICHAEL
Address: 404 S. BEACH STREET #303
City-St-Zip: DAYTONA BCH, FL 32114

Title: TD () Delete
Name: YAEGER, MARGARET
Address: 404 S BEACH ST, #1202
City-St-Zip: DAYTONA BCH, FL 32114

Title: SD () Delete
Name: HEISLER, ROBERT
Address: 404 S. BEACH ST #1201
City-St-Zip: DAYTONA BCH, FL 32114

Title: VCD () Delete
Name: BROWN, ELAINE
Address: 404 S. BEACH STREET #1004
City-St-Zip: DAYTONA BCH, FL 32114

Title: D () Delete
Name: GABY, DONALD
Address: 404 S. BEACH STREET #701
City-St-Zip: DAYTONA BCH, FL 32114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: SMITH, DEB
Address: 404 S BEACH ST, #103
City-St-Zip: DAYTONA BCH, FL 32114

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WIREN, KERSTIN
Address: 404 S. BEACH STREET #502
City-St-Zip: DAYTONA BCH, FL 32114

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL SHEWMAKER

C

04/16/2009

Electronic Signature of Signing Officer or Director

Date