## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#751075**

FILED Feb 25, 2009 Secretary of State

Entity Name: THE LANDINGS CARRIAGEHOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	KNEY POINT	RD.				
118A SARASOT	A, FL 34231					
			New Maili	Add		
Current W	lailing Addres	<b>&gt;&gt;.</b>	new main	ng Address	<b>.</b>	
2477 STIC 118A	KNEY POINT	RD.				
SARASOT	A, FL 34231					
FEI Number	: 59-2071277	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	l Address of (	Current Registered Agent:	Name and	Address o	f New Registered Agent:	
2477 STIC #118A	ROPERTY MG KNEY POINT A, FL 34231	RD.				
	e named entity e of Florida.	submits this statement for the p	urpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUI	RE:					
		nic Signature of Registered Age	nt		Date	
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGE	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	TANNENBAUM	PKWY 504 TN	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	PD ( GOURLAY, EL 1728 KESTRAI SARASOTA, FI	_ PKWY S.	Title: Name: Address: City-St-Zip:	VPD GOURLAY, I 1728 KESTF SARASOTA,	RAL PKWY S.	
Title: Name: Address: City-St-Zip:	D ( HASZLAKIF, W 5051 KESTAUI SARASOTA, FI	PARK DR.	Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition WICZ, MARIAN AUL PARK DR. FL 34231	
Title: Name: Address: City-St-Zip:	SD ( SHERLINE, MA 1748 LANDING SARASOTA, FL	BLVD	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	HAMER, WALT	_ PKWY SOUTH	Title: Name: Address: City-St-Zip:	PD HAMER, WA 1724 KESTF SARASOTA,	RAL PKWY SOUTH	

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: DEB GIFFORD VP 02/25/2009