

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757834

FILED
Apr 08, 2011
Secretary of State

Entity Name: THE LANDINGS CARRIAGEHOUSE II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

KESTRAL PKWY N.
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

CASEY CONDO MGMT.
4370 S. TAMIAMI TRAIL, SUITE 102
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 59-2151880 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CASEY CONDOMINIUM MGMT
4370 S TAMIAMI TRAIL
SUITE 102
SARASOTA, FL 34231 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: PD
Name: STEVES, DAVID
Address: 4849 KESTRAL PKWY N
City-St-Zip: SARASOTA, FL 34231

Title: VD
Name: HUMMEL, DANA
Address: 4933 KESTRAL PARKWAY NORTH
City-St-Zip: SARASOTA, FL 34231

Title: TD
Name: SULLIVAN, HELEN
Address: 4804 KESTRAL PARK CIRCLE
City-St-Zip: SARASOTA, FL 34231

Title: SD
Name: BRYDA, MARLENE
Address: 4802 KESTRAL PARK CIRCLE
City-St-Zip: SARASOTA, FL 34231

Title: D
Name: SPELMAN, LAURENCE
Address: 4812 KESTARL PARK CIRCLE
City-St-Zip: SARASOTA, FL 34231

Title: AS
Name: SPENCE, BRIDGET
Address: 4370 SOUTH TAMIAMI TRAIL #102
City-St-Zip: SARASOTA, FL 34231

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: BRIDGET SPENCE

AS

04/08/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date