

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008422

FILED
Apr 10, 2008
Secretary of State

Entity Name: AUDUBON LANDING ASSOCIATION, INC.

Current Principal Place of Business:

3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

PO BOX 1418
PALM HARBOR, FL 34682

New Mailing Address:

3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683

FEI Number: 59-3714780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, JACK B
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

HANSON, JACK B
MELROSE-SOVEREIGN COMPANIES
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683 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: JACK B HANSON

04/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DANGER, LARRY
Address: 8602 EGRET POINT CT
City-St-Zip: TAMPA, FL 33647

Title: VPD () Delete
Name: GLANTZ, ARNOLD
Address: 8608 EGRET POINT CT
City-St-Zip: TAMPA, FL 33647

Title: SD () Delete
Name: THORNHILL, JULIE
Address: 19121 LAKE AUDUBON DR
City-St-Zip: TAMPA, FL 33647

Title: TD () Delete
Name: GREENBAUM, JOHN
Address: 8607 EGRET POINT CT
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: ALDRICH, JUDY
Address: 19186 LAKE AUDUBON DR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: INNOCENTI, JOHN
Address: 19152 LAKE AUDUBON DR
City-St-Zip: TAMPA, FL 33647

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: LARRY DANGER

P

04/10/2008

Electronic Signature of Signing Officer or Director

Date