

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008422

FILED  
Apr 17, 2009  
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:**

3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683

**New Mailing Address:**

**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  
MELROSE-SOVEREIGN COMPANIES  
3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683 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 ( ) 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: INNOCENTI, JOHN  
Address: 19152 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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

04/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date