

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
Feb 05, 2008 8:00 am  
Secretary of State

02-05-2008 90011 009 \*\*\*\*61.25

DOCUMENT # N00109

1. Entity Name  
ADAM'S LANDING ASSOCIATION, INC.



Principal Place of Business  
1515 ADAMS CIRCLE  
LARGO, FL 33770 US

Mailing Address  
STERLING MANAGEMENT SERVICES  
2870 SCHERER DRIVE N. SUITE 100  
ST. PETERSBURG, FL 33716 US

4001000



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01092008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
59-2551237

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Cianfrone, Joseph R D.A.  
1968 Bayshore Blvd.  
Dunedin, FL 34698

Name  
Brodny and Rabin  
Street Address (P.O. Box Number is Not Acceptable)  
200 N. Pine Ave. Suite A  
City  
Oldsmar FL Zip Code  
34677

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Michael J. Brodny*  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 1/24/08

Filing Fee is \$61.25  
Due by May 1, 2008

9. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME MAHER, DIANE ☐ Delete  
STREET ADDRESS 1509 ADAMS CIR E.  
CITY-ST-ZIP LARGO, FL 33771

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME VP ☐ Delete  
STREET ADDRESS CROSS, MARK  
CITY-ST-ZIP 1429 ADAMS CIRCLE EAST  
LARGO, FL 33771

TITLE  
NAME President ☒ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME CERCEK, LISA ☐ Delete  
STREET ADDRESS PO BOX 618  
CITY-ST-ZIP BAY PINES, FL 33744

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME P ☒ Delete  
STREET ADDRESS JACOBSON, DEAN  
CITY-ST-ZIP 1527 ADAMS CIRCLE  
LARGO, FL 33771

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME D ☐ Delete  
STREET ADDRESS CROSS, ELAINE  
CITY-ST-ZIP 1429 ADAMS CIRCLE E  
LARGO, FL 33771

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME DIRECTOR ☐ Change ☒ Addition  
STREET ADDRESS DAVID GARDINIA  
CITY-ST-ZIP 1606 ADAMS Circle  
Largo, FL 33771

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Michael J. Brodny*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-08

727-581-5791

Date

Daytime Phone #