

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004031

FILED
Mar 23, 2009
Secretary of State

Entity Name: LANDMARK PIER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2100 WEST BEACH DRIVE
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

2100 WEST BEACH DRIVE
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 20-2503073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINDSEY, RANDY
2100 WEST BEACH DRIVE
APT. # T-101
PANAMA CITY, FL 32401 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: P () Delete
Name: BRIGHT, J.D.
Address: 1683 DOUBLE SPRINGS CHURCH RD.
City-St-Zip: MONROE, GA 30656

Title: V () Delete
Name: FOLKES, JIM
Address: 2130 BEN IVEY ROAD
City-St-Zip: WEBB, AL 36376

Title: ST () Delete
Name: LINDSEY, RANDY
Address: 211 PINE CREST DRIVE
City-St-Zip: CUMMING, GA 30040

Title: BOAR () Delete
Name: SEITZ, JAY
Address: 185 MARTIN DRIVE
City-St-Zip: ALPHARETTA, GA 30004

Title: BOAR () Delete
Name: CHAMBERS, JOHN
Address: 2100 W. BEACH DRIVE #Q-202
City-St-Zip: PANAMA CITY, FL 32401

Title: BOAR () Delete
Name: WILSON, HUGH
Address: 6421 SHETLAND DRIVE
City-St-Zip: KNOXVILLE, TN 37920

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:

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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: RANDY LINDSEY

_____ Electronic Signature of Signing Officer or Director

ST

03/23/2009

_____ Date