## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000007501

Apr 21, 2010 Secretary of State

US

Entity Name: DANIEL'S LANDING ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

225 S WESTMONTE DRIVE 225 S WESTMONTE DR

**SUITE 3310** STE #3310

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US

**Current Mailing Address:** New Mailing Address:

C/O VISTA COMMUNITY ASSOCATION MANAGEMENT PO BOX 162147 ALTAMONTE SPRINGS, FL 32716

P.O. BOX 162147

ALTAMONTE SPRINGS, FL 327162147

FEI Number: 57-1184925 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOMACK, ELLEN R VISTA COMMUNITY ASSOCIATION MANAGEMENT

225 S WESTMONTE DRIVE 225 S WESTMONTE DR

#3310 **SUITE 3310** 

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 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: ELLEN R WOMACK 04/21/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

EASTERLY, EMILY Name:

Address: 13261 DANIELS LANDING CIRCLE City-St-Zip: WINTER GARDEN, FL 34787 US

Title:

Name: BURROWS, LISA

Address: 13241 DANIELS LANDING CIRCLE City-St-Zip: WINTER GARDEN, FL 34787 US

Title: DP

VIGILANTE, MICHAEL Name:

13370 DANIELS LANDING CIRCLE Address: City-St-Zip: WINTER GARDEN, FL 34787 US

Title: DV

Name: BREEN, NORM

13347 DANIELS LANDING CIRCLE Address: City-St-Zip: WINTER GARDEN, FL 34787 US

Title: DS

Name: TRICARIO, TOM

13249 DANIELS LANDING CIRCLE Address: City-St-Zip: WINTER GARDEN, FL 34787 US

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: MICHAEL VIGILANTE DP 04/21/2010