

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07078

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** LANDMARK AT POINTE WEST CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6304 POINTE WEST BLVD  
BRADENTON, FL 34209 US

**New Principal Place of Business:**

**Current Mailing Address:**

4301 32ND STREET WEST  
A-20  
BRADENTON, FL 34205 US

**New Mailing Address:**

**FEI Number:** 59-2837229      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

C&S CONDO MGMNT SERV INC  
4301 32ND STREET WEST  
SUITE A-20  
BRADENTON, FL 34205 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  
Name: RAWLINGS, RODERIC  
Address: 6802 22ND AVE W  
City-St-Zip: BRADENTON, FL 34209

Title: VP  
Name: PARENTEAU, IRENE  
Address: 6304 POINTE WEST BLVD #209  
City-St-Zip: BRADENTON, FL

Title: T  
Name: ANDREWS, DALE  
Address: 6304 POINTE WEST BLVD #105  
City-St-Zip: BRADENTON, FL 32409

Title: S  
Name: LANCE, GAYLE  
Address: 6304 POINTE WEST BLVD, UNIT 201  
City-St-Zip: BRADENTON, FL 34209

Title: D  
Name: CLEM, RICHARD  
Address: 6304 POINTE WEST BLVD. # 205  
City-St-Zip: BRADENTON, FL 34209

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: RODRIC RAWLINGS

PRES

01/06/2010

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

\_\_\_\_\_  
Date