

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 29, 2009
Secretary of State

DOCUMENT# N08000009436

Entity Name: INDEPENDENCE TOWNHOMES III ASSOCIATION, INC.**Current Principal Place of Business:**6972 LAKE GLORIA BLVD
ORLANDO, FL 328093200 US**New Principal Place of Business:****Current Mailing Address:**6972 LAKE GLORIA BLVD
ORLANDO, FL 328093200 US**New Mailing Address:****FEI Number:** 26-4760562**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LELAND MANAGEMENT INC
6972 LAKE GLORIA BLVD
ORLANDO, FL 328093200 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: FRANKS, COLBY
Address: 11315 CORPORATE BLVD., SUITE 250
City-St-Zip: ORLANDO, FL 32817 US

Title: VD () Delete
Name: HAWKS, CANDICE
Address: 11315 CORPORATE BLVD., SUITE 250
City-St-Zip: ORLANDO, FL 32817 US

Title: STD () Delete
Name: FEUERMAN, LISA
Address: 11315 CORPORATE BLVD., SUITE 250
City-St-Zip: ORLANDO, FL 32817 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHAMBERS, ANDY
Address: 11315 CORPORATE BLVD., SUITE 250
City-St-Zip: ORLANDO, FL 32817 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: DEMOTT, DENNIS
Address: 11315 CORPORATE BLVD., SUITE 250
City-St-Zip: ORLANDO, FL 32817 US

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: ANDY CHAMBERS

PD

09/29/2009

Electronic Signature of Signing Officer or Director

Date