

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90044 007 ****61.25

DOCUMENT # N11856



1. Entity Name
COLONIAL LANDINGS CONDOMINIUM ASSOCIATION,
INC.

Principal Place of Business
PO BOX 196025
WINTER SPRINGS, FL 32719-6025

Mailing Address
PO BOX 196025
WINTER SPRINGS, FL 32719-6025

50002283



2. Principal Place of Business - No P.O. Box #
1128 East Donegan Ave
Suite, Apt. #, etc.

3. Mailing Address
1128 East Donegan Ave
Suite, Apt. #, etc.

01172008 Chg-NP CR2E037 (12/06)

City & State
Kissimmee, FL
Zip
34744
Country
USA

City & State
Kissimmee, FL
Zip
34744
Country
USA

4. FEI Number
59-2791206
Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MORRIS, FRAYDA R
CENTRAL ASSOCIATION MGMT.
ORLANDO, FL 32837

1128 East Donegan Ave

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRES VP
COURECH, RYAN
PO BOX 196025
WINTER SPRINGS, FL 327196025 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
NEFF, MARCIA
PO BOX 196025
WINTER SPRINGS, FL 327196025 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
BORGRND, JENNIFER
PO BOX 196025
WINTER SPRINGS, FL 327196025 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
PALMER, PAT
P.O. BOX 196025
WINTER SPRINGS, FL 32719 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MISSICK, HERB
P.O. BOX 196025
WINTER SPRINGS, FL 32719 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/25/08 **800-428-9767**