

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13895

FILED  
Jan 25, 2010  
Secretary of State

**Entity Name:** THE LANDINGS SOUTH III CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

PROGRESSIVE COMMUNITY MGMT., INC.  
1801 GLENGARY STREET - FL. 1  
SARASOTA, FL 34231 US

**New Principal Place of Business:**

C/O NICK POCOCK  
1331 LANDINGS DRIVE  
SARASOTA, FL 34231 US

**Current Mailing Address:**

PROGRESSIVE COMMUNITY MGMT., INC.  
1801 GLENGARY STREET - FL. 1  
SARASOTA, FL 34231 US

**New Mailing Address:**

C/O NICK POCOCK  
1331 LANDINGS DRIVE  
SARASOTA, FL 34231 US

**FEI Number:** 59-2954338

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PROGRESSIVE COMMUNITY MGMT., INC.  
1801 GLENGARY STREET - FL. 1  
SARASOTA, FL 34231 US

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

POCOCK, NICHOLAS J MR  
1331 LANDINGS DRIVE  
SARASOTA, FL 34231 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: NICHOLAS J POCOCK

01/25/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WATSON, EVA  
Address: 5269 HERON WAY  
City-St-Zip: SARASOTA, FL 34231

Title: TVPD  
Name: LEWIS, SUSAN  
Address: 5241 HERON WAY  
City-St-Zip: SARASOTA, FL 34231

Title: SD  
Name: SAVREN, MORRIS  
Address: 5279 HERON WAY  
City-St-Zip: SARASOTA, FL 34231

Title: D  
Name: KRIDER, JAMES  
Address: 5239 HERON WAY  
City-St-Zip: SARASOTA, FL 34231

Title: D  
Name: TAYLOR, BARRIE  
Address: 5275 HERON WAY  
City-St-Zip: SARASOTA, FL 34231

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: EVA WATSON

PD

01/25/2010

Electronic Signature of Signing Officer or Director

Date