

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15805

FILED  
Feb 11, 2011  
Secretary of State

**Entity Name:** SETTLERS LANDING NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

14101 TOWN LOOP BLVD  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

14101 TOWN LOOP BLVD  
ORLANDO, FL 32837

**New Mailing Address:**

FEI Number: 59-2864046

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAYLOR, ROBERT L  
150 N. WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714 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: DP  
Name: SCOTT, EMOGENE  
Address: 2244 STONEMILL DRIVE  
City-St-Zip: ORLANDO, FL 32837

Title: DST  
Name: LUHTALA, LAURA  
Address: 2447 SETTLERS TRAIL  
City-St-Zip: ORLANDO, FL 32837

Title: D  
Name: SEEFRIED, SANDY  
Address: 14526 MUSKET FIRE LANE  
City-St-Zip: ORLANDO, FL 32837

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: EMOGENE SCOTT

DP

02/11/2011

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

\_\_\_\_\_  
Date