

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17803

FILED
Jan 15, 2009
Secretary of State

Entity Name: HANSON'S LANDING DOCK ASSOCIATION, INC.

Current Principal Place of Business:

6161 SE LANDING WAY
16
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

P O BOX 512
PORT SALERNO, FL 349920512

New Mailing Address:

FEI Number: 59-2743403

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTANZO, LOUIS
6161 SE LANDING WAY #16
STUART, FL 34997 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: COSTANZO, LOUIS
Address: 6161 SE LANDING WAY #16
City-St-Zip: STUART, FL 34997

Title: VD () Delete
Name: RAAZ, ERNEST
Address: 6142 SE LANDING WAY SUITE 7
City-St-Zip: STUART, FL 34997

Title: SD () Delete
Name: NOLA, FRANK
Address: 6161 SE LANDING WAY #1
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: LOUIS COSTANZO

PRES

01/15/2009

Electronic Signature of Signing Officer or Director

Date