

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90127 041 ****61.25

DOCUMENT # N40337

1. Entity Name

MARK'S LANDING PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

**6224 MIDSHIP LANE
MELBOURNE BEACH FL 32951**

Mailing Address

**PO BOX 0135
MELBOURNE BEACH FL 32951**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-3125043

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GALLO MARY LOU
6224 MIDSHIP LANE
MELBOURNE BEACH FL 32951**

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

Mary Lou Gallo

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW - 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 **pres.** ☐ Delete
NAME **DIDDEN, WILLIAM S**
STREET ADDRESS **125 REGATTA ST.**
CITY-ST-ZIP **MELBOURNE BEACH FL**

TITLE **VP** ☐ Delete
NAME **CARNEGIE, JOHN**
STREET ADDRESS **106 REGATTA ST**
CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

TITLE **ST.** ☒ Delete
NAME **CATRI, SHARON**
STREET ADDRESS **6224 MIDSHIP LANE**
CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

TITLE **2nd VP** ☐ Delete
NAME **Parks, Greg**
STREET ADDRESS **6234 2ndward Ln.**
CITY-ST-ZIP **Mel. Beach, FL 32951**

TITLE **Sec/Treasurer** ☐ Delete
NAME **Mary Lou Gallo**
STREET ADDRESS **6224 Midship Ln.**
CITY-ST-ZIP **Mel. Beach, FL 32951**

TITLE **parliamentarian** ☐ Delete
NAME **anthi Gash**
STREET ADDRESS **125 Regatta St**
CITY-ST-ZIP **Mel. Beach FL 32951**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Mary Lou Gallo - MARY LOU GALLO

4/15/08 952-7888

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