

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50051

FILED
Mar 05, 2008
Secretary of State

Entity Name: SUTTERS LANDING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6730 NW 34 TH WAY
GAINESVILLE, FL 32653 US

New Principal Place of Business:

Current Mailing Address:

C/O ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 US

New Mailing Address:

FEI Number: 59-3174563 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SAUSAMAN, JEFFREY
6110-B NW 1ST PL
GAINESVILLE, FL 32607 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: VD () Delete
Name: BAGGALEY, DAVE
Address: 3444 NW 68TH RD
City-St-Zip: GAINESVILLE, FL 32653

Title: SD () Delete
Name: COOPER, CAROLINE
Address: 3526 NW 67TH AVE
City-St-Zip: GAINESVILLE, FL 32653

Title: TD () Delete
Name: HEMPHILL, ROD
Address: 6724 NW 34TH DR
City-St-Zip: GAINESVILLE, FL 32653

Title: D () Delete
Name: DUGIN, RICHARD
Address: 3625 NW 68TH LN
City-St-Zip: GAINESVILLE, FL 32653

Title: D () Delete
Name: FELICIANO, CARLA
Address: 6720 NW 34TH WAY
City-St-Zip: GAINESVILLE, FL 32653

Title: PD () Delete
Name: TOTTEN, ROBERT
Address: 3410 NW 67 TH AVE
City-St-Zip: GAINESVILLE, FL 32653

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:

Title: () Change () Addition
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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: ROBERT TOTTEN

P

03/05/2008

Electronic Signature of Signing Officer or Director

_____ Date