

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000163

FILED
Jan 12, 2009
Secretary of State

Entity Name: PHILLIPS LANDING MASTER COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

5401 S. KIRKMAN RD
STE 450
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5401 S. KIRKMAN RD
STE 450
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-3421112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT, PROFESSIONALS
5401 S. KIRKMAN RD
SUITE 450
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONALS
5401 S. KIRKMAN RD
SUITE 450
ORLANDO, FL 32819 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: KAREN SFARA

01/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RUBINO, FRANK
Address: 8985 HERITAGE BAY CIR
City-St-Zip: ORLANDO, FL 32836

Title: S () Delete
Name: ROBINSON, DAVID
Address: 8949 ELLIOTS CT
City-St-Zip: ORLANDO, FL 32886

Title: D () Delete
Name: ANKER, MICHAEL
Address: 8123 LAKE SERENE
City-St-Zip: ORLANDO, FL 32886

Title: T () Delete
Name: OJA, RUSSELL
Address: 8912 HERITAGE BAY CIR
City-St-Zip: ORLANDO, FL 32836

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: ROBINSON, DAVID
Address: 8949 ELLIOTS CT
City-St-Zip: ORLANDO, FL 32836

Title: D (X) Change () Addition
Name: KOLBA, ALAN
Address: 8251 LAKE SERENE DRIVE
City-St-Zip: ORLANDO, FL 32836

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

Title: D () Change (X) Addition
Name: BERRY, ROGER
Address: 8755 SOUTHERN BREEZE DRIVE
City-St-Zip: ORLANDO, FL 32836

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: FRANK RUBINO

P

01/12/2009

Electronic Signature of Signing Officer or Director

Date