

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001215

FILED
Apr 13, 2012
Secretary of State

Entity Name: SUSAN'S LANDING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PREMIER COMMUNITY MGRS INC
5151 ADANSON ST STE 103
ORLANDO, FL 32804 US

New Principal Place of Business:

C/O PREMIER COMMUNITY MANAGERS INC
1250 BELLE AVE., SUITE 101
WINTER SPRINGS, FL 32708 US

Current Mailing Address:

PREMIER COMMUNITY MGRS INC
5151 ADANSON ST STE 103
ORLANDO, FL 32804 US

New Mailing Address:

C/O PREMIER COMMUNITY MANAGERS INC
1250 BELLE AVE., SUITE 101
WINTER SPRINGS, FL 32708 US

FEI Number: 59-3431792

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUSE, GARY
PREMIER COMMUNITY MANAGERS INC
5151 ADANSON ST STE 103
ORLANDO, FL 32804 US

Name and Address of New Registered Agent:

PREMIER COMMUNITY MANAGERS INC.
1250 BELLE AVE.
SUITE 101
WINTER SPRINGS, FL 32708 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: GARY HOUSE

04/13/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MUZIA, LAURENCE
Address: 1250 BELLE AVE., SUITE 101
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: VP
Name: LEWIS, CYNTHIA
Address: 1250 BELLE AVE., SUITE 101
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: S
Name: MEREDITH, ROBERT
Address: 1250 BELLE AVE., SUITE 101
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: T
Name: MILLER, KATHY
Address: 1250 BELLE AVE., SUITE 101
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: D
Name: PARRISH, KIM
Address: 1250 BELLE AVE., SUITE 101
City-St-Zip: WINTER SPRINGS, FL 32708 US

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: LAURENCE MUZIA

PRES

04/13/2012

Electronic Signature of Signing Officer or Director

Date