

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005064

FILED
Jan 27, 2009
Secretary of State

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

Current Principal Place of Business:

372 LARBOARD WAY
CLEARWATER, FL 33767 US

New Principal Place of Business:

354 LARBOARD WAY
CLEARWATER, FL 33767 US

Current Mailing Address:

372 LARBOARD WAY
CLEARWATER, FL 33767 US

New Mailing Address:

354 LARBOARD WAY
CLEARWATER, FL 33767 US

FEI Number: 59-3545521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORSATTI, CHARLES T
372 LARBOARD WAY
CLEARWATER BEACH, FL 33767 US

Name and Address of New Registered Agent:

FRIEDLAND, JOANNE B
354 LARBOARD WAY
CLEARWATER BEACH, FL 33767 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: JOANNE B. FRIEDLAND

01/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOHLEGMUTH, DARLENE
Address: 366 LARBOARD WAY
City-St-Zip: CLEARWATER, FL 33767

Title: PD () Delete
Name: ORSATTI, CHARLES T
Address: 372 LARBOARD WAY
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: SD () Delete
Name: GLENNON, VICTORIA P
Address: 342 LARBOARD WAY
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: TD (X) Delete
Name: FRIEDLAND, JOANNE B
Address: 354 LARBOARD WAY
City-St-Zip: CLEARWATER BEACH, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARRERA, CYNTHIA L
Address: 348 LARBOARD WAY
City-St-Zip: CLEARWATER, FL 33767

Title: PDT (X) Change () Addition
Name: FRIEDLAND, JOANNE B
Address: 354 LARBOARD WAY
City-St-Zip: CLEARWATER BEACH, FL 33767

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: JOANNE B. FRIEDLAND

PDT

01/27/2009

Electronic Signature of Signing Officer or Director

Date