

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2008 8:00 am**  
**Secretary of State**

04-25-2008 90134 034 \*\*\*\*61.25

**DOCUMENT # N99000003353**

1. Entity Name  
**CHANNEL LANDING TOWNHOMES HOMEOWNER'S  
ASSOCIATION INC.**



**40082241**

Principal Place of Business  
**465 PINELLAS BAYWAY SOUTH  
TIERRA VERDE, FL 33715**

Mailing Address  
**465 PINELLAS BAYWAY SOUTH  
TIERRA VERDE, FL 33715**



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

01132008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-3201946**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WEAVER, GLORIA  
465 PINELLAS BAYWAY SOUTH  
SUITE 101  
TIERRA VERDE, FL 33715**

Name  
**CHARLES MCMURRAN**  
Street Address (P.O. Box Number is Not Acceptable)  
**465 PINELLAS BAYWAY  
SUITE 211  
TIERRA VERDE FL 33715**

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 **CHARLES MCMURRAN TREASURER**

*Charles McMurran*

**4-22-08**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**O  
BRADDY, DENNIS  
465 PINELLAS BAYWAY S #308  
TIERRA VERDE, FL 33715** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P/D  
JOHN MOORE  
465 PINELLAS BAYWAY #308  
TIERRA VERDE, FL 33715** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
JOHNSTAD, CAROL  
465 PINELLAS BAYWAY #104  
TIERRA VERDE, FL 33715** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VID  
JOHN NYITRAY  
465 PINELLAS BAYWAY #106  
TIERRA VERDE, FL 33715** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T/D  
WEAVER, GLORIA  
465 PINELLAS BAYWAY S # 101  
TIERRA VERDE, FL 33715** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TID  
CHARLES MCMURRAN  
465 PINELLAS BAYWAY # 211  
TIERRA VERDE, FL 33715** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S/D  
WILCOX, PATRICIA  
465 PINELLAS BAYWAY S #204  
TIERRA VERDE, FL 33715** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SCOTT, JOSEPH  
465 PINELLAS BAYWAY #210  
TIERRA VERDE, FL 33715** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Charles McMurran* **CHARLES MCMURRAN**

**4-22-08 (727) 865-7756**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #