


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # 726005			
1. Entity Name HILLSBORO LANDINGS ONE ASSOCIATION, INC.			
Principal Place of Business 1631 RIVERVIEW RD. DEERFIELD BEACH FL 33441		Mailing Address 1215 E HILLSBORO BLVD. DEERFIELD BEACH FL 33441	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent CAMPBELL PROPERTY MANAGEMENT 1215 E. HILLSBORO BLVD. DEERFIELD BEACH FL 33441		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
State		State	
Zip Code		Zip Code	
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		DATE	
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when constituting)	
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	VPD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUNSELL, JEFFREY	NAME	
STREET ADDRESS	1631 RIVERVIEW ROAD 903	STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RHODES, RITA	NAME	
STREET ADDRESS	1631 RIVERVIEW ROAD 307	STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERGUSON, GWEN	NAME	
STREET ADDRESS	1631 RIVERVIEW RD	STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUTA, JOAN	NAME	
STREET ADDRESS	1631 RIVERVIEW DRIVE	STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWANSON, GARY	NAME	
STREET ADDRESS	1631 RIVERVIEW RD 607	STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHEELER, DONALD	NAME	
STREET ADDRESS	1631 RIVERVIEW DRIVE	STREET ADDRESS	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	CITY-ST-ZIP	



1st MOORE CR2E037 (10/05)

4. FEI Number **59-1496625** Applied For Not Applicable

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

FL Zip Code

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Due By May 1, 2006

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CITY-ST-ZIP	DEERFIELD BEACH FL 33441	CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *[Handwritten Signature]* 4-7-06