

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 21, 2007  
Secretary of State**

DOCUMENT# 740223

Entity Name: VIKINGS LANDING PROPERTY OWNERS'ASSOCIATION, INC.

**Current Principal Place of Business:**

2417 SE DIXIE HWY  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

2417 SE DIXIE HWY  
STUART, FL 34996

**New Mailing Address:**

FEI Number: 59-1829342      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

O'HAY, WILLIAM K  
2417 SE DIXIE HWY  
STUART, FL 34996      US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: HARTLEY, CHRIS  
Address: 671 SE NORSEMAN DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: SD      ( ) Delete  
Name: KRAENGEL, JEFF  
Address: 681 SE NORSEMAN DR.  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: TD      ( ) Delete  
Name: ALSUP, JOHNNY  
Address: 2661 SE ERICKSON DR.  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: RS      ( ) Delete  
Name: FIELD, LINDA  
Address: 621 SE NORSEMAN DR.  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: VPD      ( ) Delete  
Name: KAUP, JASON  
Address: 601 SE NORSEMAN DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34984

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D      (X) Change ( ) Addition  
Name: KRAENGEL, JEFF  
Address: 681 SE NORSEMAN DR.  
City-St-Zip: PORT SAINT LUCIE, FL 34984

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

Title: SD      (X) Change ( ) Addition  
Name: FIELD, LINDA  
Address: 621 SE NORSEMAN DR.  
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: VPD      (X) Change ( ) Addition  
Name: GLASS, AARON  
Address: 2631 SE ERICKSON DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34984

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRIS HARTLEY

PD

02/21/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date