2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2006 8:00 am Secretary of State

DOCUMENT # N15805 1. Entity Name SETTLERS LANDING NEIGHBORHOOD ASSOCIATION, INC.									02-20-2	2006 900	28 029 ***	**61.25	
14101 TOWN LOOP BLVD			1410	Mailing Address 14101 TOWN LOOP BLVD ORLANDO, FL 32837 US				ουστοσάρ					
2. Principal Place of Business			3. Mail	3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			•	01092006	Chg-NP	CR2E	(11/05)	,		
City & State			City & State					4. FEI Numbe 59-286				pplied For ot Applicable	
Zip	Country		Zip	Zip Cou		untry		5. Certificate	of Status Desire	d 🗀	\$8.75 Add		
	6. Name and	Address of Currer	nt Registere	d Agent				7. Name and	Address of Ne	w Registere	d Agent		
-					Name Robert L. Taylor								
`					Street Address (P.O. Box Number is Not Acceptable) 850 Concourse Parkway South								
	•						Suite 105			-	1 = = = =		
The above named entity submits this statement for the purpose of charges.								aitland		F	_ ı ja	1751	
the obligat	named entity subr tiops <u>pt regis</u> tered a	nits this statement agent.	tor the purp	ose of changing its	register	ed office o	r register	ed agent, or bot	h, in the State o	f Florida. Ta	m familiar with, /	, and accept	
SIGNATURE Signature, typed or printed name of registered agent and bits if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													
	Signature, typed or printe	ed name of registered age	orde to othe and are	icable (NOT	E: Registere	d Agent signal	beriuper erut	when reinstating)		DATE	į l		
	Filing Fee Is Due by May 1	\$61.25 I, 2006		9. Election Car Trust Fund (npaign F Contribut	inancing		\$5.00 May B Added to Fees	1300	lorida Dep	ck payable t artinent of S	tate	
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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:

SMAJONE SEATHS EMOSONE South
BIONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-06

407-240-6000