

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90024 024 ****61.25

DOCUMENT # **N95000001477**
 Entity Name
LANDINGS MAINTENANCE ASSOCIATION, INC.

Principal Place of Business Mailing Address
 SHOTGUN RD 1067 SHOTGUN RD
 FL 33326 SUNRISE FL 33326-1906
 US

Principal Place of Business 3. Mailing Address
 Apt. #, etc. Suite. Apt. #, etc.

City & State City & State
 Country Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0462246** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
W. & ROSEN
25 N COMMERCE PKWY
225
SUN FL 33326

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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.

Edmund Kravitz 2/9/2000
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Department of State

OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
PD NITABACH, KATHY 140 DOCKSIDE CIR FT LAUDERDALE FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VD ELKIN, STEVE 408 MALLARD RD FT LAUDERDALE FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
SD DRAPUK, LISA 258 EGERT WAY FT LAUDERDALE FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TD KRAMER, BRUCE 262 EGERT WAY FT LAUDERDALE FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D SCHECHTER, CATHY 280 LANDING BLVD FT LAUDERDALE FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

Mike Bakalar - Sec
 405-mallard Ln
 Westm, FL 33326

I certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 applicable, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 2/15/2000

CR2E037 (9/99)