

2001 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 11, 2001 8:00 am
Secretary of State

04-17-2001 90062 004 ****61.25

DOCUMENT # N97000005844

1. Entity Name

LANDSBROOK TERRACE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

1633 E VINE STREET
 #110
 KISSIMMEE FL 34744

Mailing Address

1633 E VINE STREET
 #110
 KISSIMMEE FL 34744

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3474995

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

LELAND MANAGEMENT, INC
1633 E VINE STREET
SUITE 110
KISSIMMEE FL 34744

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Rebecca Surban

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/28/01

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: DP-
 NAME: O'SULLIVAN, CHARLES
 STREET ADDRESS: 555 WINDERLEY PLACE STE 420
 CITY-ST-ZIP: MAITLAND FL 32751
 Delete

TITLE: DV
 NAME: COOK, CHARLES E
 STREET ADDRESS: 555 WINDERLEY PLACE STE 420
 CITY-ST-ZIP: MAITLAND FL 32751
 Delete

TITLE: DST
 NAME: PARKER, JENNIFER
 STREET ADDRESS: 555 WINDERLEY PLACE STE 420
 CITY-ST-ZIP: MAITLAND FL 32751
 Delete

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Pres.
 NAME: Jack Cahill
 STREET ADDRESS: 4705 Windsor Avenue
 CITY-ST-ZIP: Orlando, FL 32819
 Change Addition

TITLE: Secretary
 NAME: Sherry Martin
 STREET ADDRESS: 6484 Winder Oak Blvd.
 CITY-ST-ZIP: Ori., FL 32819
 Change Addition

TITLE: Treasurer
 NAME: Laven Smith
 STREET ADDRESS: 4717 Windsor Ave
 CITY-ST-ZIP: Orlando, FL 32819
 Change Addition

TITLE: OFFICER
 NAME: GREG LUKE
 STREET ADDRESS: 4772 Windsor Ave
 CITY-ST-ZIP: Orlando, FL 32819
 Change Addition

TITLE: OFFICER
 NAME: VANESSA A Pickett
 STREET ADDRESS: 6433 Winder Oaks Blvd
 CITY-ST-ZIP: Orlando, FL 32819
 Change Addition

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

12. I hereby 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 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:

REBECCA SURBAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 April 01 (409) 251-2157

Date

Daytime Phone #

CR2E037 (10/00)