

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90066 001 ****61.25

DOCUMENT # N97000005844
 1. Entity Name
LANDSBROOK TERRACE HOMEOWNERS ASSOCIATION, INC.



14006004

Principal Place of Business Mailing Address
 1633 E VINE STREET 1633 E VINE STREET
 #110 #110
 KISSIMMEE, FL 34744 KISSIMMEE, FL 34744



02172004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3474995	Applied For Not Applicable
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5. Certificate of Status Desired **\$8:75 Additional Fee Required**

6. Name and Address of Current Registered Agent
LELAND MANAGEMENT, INC
 1633 E VINE STREET
 SUITE 110
 KISSIMMEE, FL 34744

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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: *[Handwritten Signature]*

4/8/04
 DATE

**Filing Fee is \$61.25
 Due by May 1, 2004**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MARTIN, MONTE 6484 WINDER OAKS BLVD. ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KROL, JOANNE 6349 HUNTSVILLE STREET ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHWALBACK, GENE 6413 WINDER OAKS BLVD. ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHOEBI, JAM 4729 WINDSOR AVENUE ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PECLOT, VANESSA 6933 WINDER OAKS BLVD ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARDIZONE, JOHN 4701 WINDSOR AVENUE ORLANDO, FL 32819

DO NOT WRITE IN THIS SPACE

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: *[Handwritten Signature]* **John Ardizone Jr / President** 3/25/04 4072954241
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #