

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005844

FILED  
Mar 26, 2008  
Secretary of State

Entity Name: LANDSBROOK TERRACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2582 SOUTH MAGUIRE RD  
318  
OCOEE, FL 34761

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 783367  
WINTER GARDEN, FL 34778

**New Mailing Address:**

FEI Number: 59-3474995      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SOLOMON, SPENCER R  
14443 PRUNNING WOOD PLACE  
WINTER GARDEN, FL 34787      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: OCASIA, JOSE  
Address: 4753 WINDSOR AVE  
City-St-Zip: ORLANDO, FL 32819

Title: VPD      ( ) Delete  
Name: ILTSOPOULOS, NICK  
Address: 6366 HUNTSVILLE STREET  
City-St-Zip: ORLANDO, FL 32819

Title: STD      ( ) Delete  
Name: COX, RUTH  
Address: 6355 HUNTSVILLE ST  
City-St-Zip: ORLANDO, FL 32819

Title: SD      ( ) Delete  
Name: KUTCHER, JOEY  
Address: 6360 HUNTSVILLE STREET  
City-St-Zip: ORLANDO, FL 32819

Title: D      ( ) Delete  
Name: MARTIN, MONTE  
Address: 6484 WINDER OAKS BLVD  
City-St-Zip: ORLANDO, FL 32819

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

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

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

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

Title: SD      (X) Change ( ) Addition  
Name: COPELAND, JOEL  
Address: 6436 WINDER OAKS BLVD  
City-St-Zip: ORLANDO, FL 32819

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

I hereby certify that the information supplied with this filing does not qualify 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: SPENCER SOLOMON

RA

03/26/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date