


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 04, 2005 8:00 am
Secretary of State

03-04-2005 90096 018 ****61.25

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1. Entity Name
LYNDELL PLANTATION HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**12237 LYNDELL PLANTATION DR
 PANAMA CITY BEACH, FL 32407**

Mailing Address
**P.O. BOX 18911
 PANAMA CITY, FL 32417**

JUUZZ68J



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

01242005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-3584138

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
**THOMAS, KERN L
 12237 LYNDELL PLANTATION DR
 PANAMA CITY BEACH, FL 32407**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2005

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PT	THOMAS, KERN L	12237 LYNDELL PLANTATION DR	PANAMA CITY BEACH, FL 32407	<input checked="" type="checkbox"/>
VD	SHOW, RICHARD	12237 LYNDELL PLANTATION DR	PANAMA CITY BEACH, FL 32407	<input type="checkbox"/>
SD	SMITH, PATRICIA	12237 LYNDELL PLANTATION DR	PANAMA CITY BEACH, FL 32407	<input checked="" type="checkbox"/>
D	LAMB, CHARLES	12237 LYNDELL PLANTATION DR	PANAMA CITY BEACH, FL 32407	<input type="checkbox"/>
D	DAVISON, BRIAN	12202 LYNDELL PLANTATION DR	PANAMA CITY BEACH, FL 32407	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input checked="" type="checkbox"/>	<input type="checkbox"/>
TD	JOHN E. WARREN	12216 LYNDELL PLANTATION DR	PANAMA CITY BEACH, FL 32407	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: [Signature] **3-3-05** 850-233-4455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #