2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001471

FILED Mar 29, 2004 Secretary of State

Entity Name: OAKMONT AT LANSBROOK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3974 TAMPA RD. SUITE B

OLDSMAR, FL 34677

New Mailing Address: Current Mailing Address:

P.O. BOX 2157

OLDSMAR, FL 346772157

FEI Number: 59-3379718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HANSON, JACK 3974 TAMPA ROAD SUITE B OLDSMAR, FL 34677 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete FERNANDEZ, JOE Name: 4392 LIVE OAK BLVD. Address: City-St-Zip: PALM HARBOR, FL 34685

Title: () Delete BENEDON, VICKY Name: Address: 4365 LIVE OAK BLVD City-St-Zip: PALM HARBOR, FL 34685

Title: () Delete CRINNIAN, JOAN Name: 4350 LIVE OAK BLVD. Address: City-St-Zip: PALM HARBOR, FL 34685

Title: TD () Delete Name: MARTIN, BILL

Address: 4387 WATER OAK WAY City-St-Zip: PALM HARBOR, FL 34685

Title: () Delete PALSO, BEVERLY Name: 4440 LIVE OAK BLVD. Address: City-St-Zip: PALM HARBOR, FL 34685

(X) Change () Addition MARTIN, BILL Name:

Address: 4387 WATER OAK WAY. City-St-Zip: PALM HARBOR, FL 34685

Title: VPD (X) Change () Addition

Name: WALLER, GERRY Address: 4377 LIVE OAK BLVD City-St-Zip: PALM HARBOR, FL 34685

Title: SD (X) Change () Addition

MEYER, MIKE Name: Address: 4356 LIVE OAK BLVD. City-St-Zip: PALM HARBOR, FL 34685

Title: TD (X) Change () Addition

Name: FISCHER, RUSS Address: 3992 SILK OAK LALNE City-St-Zip: PALM HARBOR, FL 34685

Title: (X) Change () Addition

BERLIN, ELIZABETH Name: 4040 SILK OAK LANE Address: City-St-Zip: PALM HARBOR, FL 34685

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BILL MARTIN **PRES** 03/29/2004