

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
May 20, 2005 8:00 am
Secretary of State

03-09-2005 90036 024 ****61.25

DOCUMENT # 709500			
1. Entity Name LANDFALL APARTMENTS, INC.			
Principal Place of Business 1440 SOUTH EAST 15 STREET #22 FORT LAUDERDALE FL 33316		Mailing Address 1440 SOUTH EAST 15 STREET #22 FORT LAUDERDALE FL 33316	
2. Principal Place of Business 1440 SE 15 St		3. Mailing Address Same	
Suite, Apt. #, etc. Apt 22		Suite, Apt. #, etc. apt 22	
City & State FT Land FL		City & State FT Land FL	
Zip 33316		Zip 33316	
Country Brow		Country Brow	
4. FEI Number 59-1201966		Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent DAVIS, RAY 1440 SE 15TH STREET FORT LAUDERDALE FL 33316		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: <u>Ray W Davis</u> DATE: <u>3-5-05</u>			
FILE NOW! FEE IS \$81.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP VD GADE, BRUCE 1440 S.E. 15TH ST. FT. LAUDERDALE FL 33316		TITLE NAME STREET ADDRESS CITY-STATE-ZIP President of Board	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP STD DAVIS, RAY 1440 SE 15TH ST FT LAUDERDALE, FL 00000 33316		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Treasurer	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP D MAUREEN FRIES 1440 SE 15 ST FT. LAUD FL 33316		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Secretary	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP D RAY McCallum 1440 SE 15 ST FT Land FL 33316		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Board Member	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP D RAY McCallum 1440 SE 15 ST FT Land FL 33316		TITLE NAME STREET ADDRESS CITY-STATE-ZIP Board Member	
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 817, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with or without a signature.			
SIGNATURE: <u>Ray W Davis</u>		Treas <u>3-30-05 954-5286324</u>	