

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 31, 2003 8:00 am**  
**Secretary of State**

03-31-2003 90180 011 \*\*\*\*61.25

**DOCUMENT # 709500**

1. Entity Name  
**LANDFALL APARTMENTS, INC.**



Principal Place of Business  
**1440 SOUTH EAST 15 STREET  
#22  
FORT LAUDERDALE FL 33316-2763**

Mailing Address  
**1440 SOUTH EAST 15 STREET  
FORT LAUDERDALE FL 33316-2763**

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

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



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1201966**

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**

Applied For  
 Not Applicable

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 *Ray W Davis* *Treas.* **3-27-03**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW: FEE IS \$61.25**

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	VD	<input type="checkbox"/> Delete
NAME	<b>GADE, BRUCE</b>	
STREET ADDRESS	<b>1440 S.E. 15TH ST.</b>	
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>	
TITLE	STD	<input type="checkbox"/> Delete
NAME	<b>DAVIS, RAY</b>	
STREET ADDRESS	<b>1440 SE 15TH ST</b>	
CITY-ST-ZIP	<b>FT-LAUDERDALE; FL-00000</b>	
TITLE	D	<input type="checkbox"/> Delete
NAME	<b>MAUREEN FRIES</b>	
STREET ADDRESS	<b>1440 SE 15 ST</b>	
CITY-ST-ZIP	<b>FT. LAUD FL</b>	
TITLE	D	<input type="checkbox"/> Delete
NAME	<b>RUSSEL AVATA</b>	
STREET ADDRESS	<b>1440 SE 15 ST</b>	
CITY-ST-ZIP	<b>FT. LAUD FL</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Ray W Davis* **3-27-03**

CR2E037 (10/02)