2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007
Secretary of State

DOCUMENT# 712939

Entity Name: HAPPY LANDINGS HOMES, INC.

Current Principal Place of Business:

5925 OLD DIXIE HWY.
MELBOURNE, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

5925 OLD DIXIE HWY.
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 59-1673251 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MILLER, DAVID F
5925 OLD DIXIE HWY.
MELBOURNE, FL 32940 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:	COULTER, ARLENE	
Address:	5925 OLD DIXIE HWY.	
City-St-Zip:	MELBOURNE, FL 32940	
Title:	VD	( ) Delete
Name:	MILLER, DAVID F	
Address:	5925 OLD DIXIE HWY	
City-St-Zip:	MELBOURNE, FL 32940	
Title:	SD	( ) Delete
Name:	BRADLEY, FRANCIS M	
Address:	427 TIMBERLAKE DR.	
City-St-Zip:	MELBOURNE, FL 32940	
Title:	D	( ) Delete
Name:	BOYD, CHARLES	
Address:	209 NO ATLANTIC	
City-St-Zip:	COCOA BEACH, FL 32931	
Title:	D	( ) Delete
Name:	BUESCHER, LILA	
Address:	6767 NORTH WICKHAM RD SUITE 500	
City-St-Zip:	MELBOURNE, FL 32940	
Title:	TD	( ) Delete
Name:	PETRIK, WILLIAM	
Address:	5925 OLD DIXIE HWY	
City-St-Zip:	MELBOURNE, FL 32940	

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

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM PETRIK TD 02/19/2007

Electronic Signature of Signing Officer or Director — Date