

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 747846 (4)  
1. Corporation Name  
THE LANDINGS RESIDENTIAL ASSOCIATION, INC.

FILED  
Aug 26 1997 8:00am  
Secretary of State



Principal Place of Business Mailing Address  
5540 BAYVIEW DRIVE 5540 BAYVIEW DRIVE  
FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308  
US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 5200 BAYVIEW DR 26 5200 BAYVIEW DR  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
22 27  
City & State FT. LAUD., FL. City & State FT. LAUD., FL.  
23 28  
Zip 33308 Country USA Zip 33308 Country USA  
24 25 29 30

3. Date Incorporated or Qualified 06/22/1979 3a. Date of Last Report 04/26/1996  
4. FEI Number 59-1909966 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent  
BERNSTEIN, MICHAEL  
5237 NE 31 AVE  
FT. LAUDERDALE FL 33308

10. Name and Address of New Registered Agent  
81 Name PATRICK VIVEIROS  
82 Street Address (P.O. Box Number is Not Acceptable) 5200 BAYVIEW DR  
83  
84 City FT. LAUD., FL 85 Zip Code 33308

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Patrick Viveiros PATRICK VIVEIROS 8/18/97  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS  
TITLE P GARVER, JAMES ☒ DELETE  
NAME  
STREET ADDRESS 5540 BAYVIEW DR  
CITY-ST-ZIP FT. LAUDERDALE FL  
TITLE VP HILLOCK, LEO ☒ DELETE  
NAME  
STREET ADDRESS 5241 NE 29 AVENUE  
CITY-ST-ZIP FT. LAUDERDALE FL  
TITLE T BEDOCS, ELIZABETH ☒ DELETE  
NAME  
STREET ADDRESS 3100 NE 57TH COURT  
CITY-ST-ZIP FT. LAUDERDALE FL  
TITLE S MURRAY, CLAIRE ☒ DELETE  
NAME  
STREET ADDRESS 5568 NE 29 AVE  
CITY-ST-ZIP FT. LAUDERDALE FL  
TITLE D JANARO, JERRY ☒ DELETE  
NAME  
STREET ADDRESS 3221 NE 58 STREET  
CITY-ST-ZIP FT. LAUDERDALE FL  
TITLE D JOHANSON, SUSAN ☐ DELETE  
NAME  
STREET ADDRESS 5335 NE 31 AVENUE  
CITY-ST-ZIP FT. LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE PRESIDENT ☒ Change ☒ Addition  
1.2 NAME PATRICK VIVEIROS PRES.  
1.3 STREET ADDRESS 5200 BAYVIEW DR  
1.4 CITY-ST-ZIP FT. LAUD., FL. 33308  
2.1 TITLE BINNI SWEENEY V.P. ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 3010 NE 57 ST.  
2.4 CITY-ST-ZIP FORT. LAUD., FL. 33308  
3.1 TITLE CARLOS RIVERA ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS 5570 NE 31 AV  
3.4 CITY-ST-ZIP FORT LAUD., FL. 33308  
4.1 TITLE SAME ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE DEBRA BRADFORD ☒ Change ☐ Addition  
5.2 NAME DIRECTOR  
5.3 STREET ADDRESS 5201 BAYVIEW DR  
5.4 CITY-ST-ZIP FT. LAUD., FL. 33308  
6.1 TITLE SAME ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
-08/28/97--01019--005  
\*\*\*\$1.25  
PC  
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14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE REQUIRED Patrick Viveiros 7/20/97 493-7382

CR2E037 (4/97)