

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005 8:00 am
Secretary of State

01-21-2005 90089 016 ****61.25

DOCUMENT # 747846

1. Entity Name
THE LANDINGS RESIDENTIAL ASSOCIATION, INC.



Principal Place of Business
3120 NE 57TH CT 5281 NE 28 AVE
FT. LAUDERDALE, FL 33308 US

Mailing Address
3120 NE 57TH CT 5281 NE 28 AVE
FT. LAUDERDALE, FL 33308 US

50005447



2. Principal Place of Business
5281 NE 28 AVE

3. Mailing Address
5281 NE 28 AVE

Suite, Apt. #, etc.

01132005 Chg-NP CR2E037 (10/03)

City & State
FT LAUDERDALE FL

City & State
FT LAUDERDALE FL

4. FEI Number
59-1909966

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

Zip Country
33308

Zip Country
33308

6. Name and Address of Current Registered Agent

WELSCH, JOSEPH
3120 NE 57TH CT 5281 NE 28 AVE
FT. LAUDERDALE, FL 33308

7. Name and Address of New Registered Agent

Name
~~WELSCH, JOSEPH~~

Street Address (P.O. Box Number is Not Acceptable)
5281 NE 28 AVE

City
~~FT LAUDERDALE~~ **FL** Zip Code
~~33308~~

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRANE, DAVID		NAME		
STREET ADDRESS	3121 NE 56 COURT		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	TRD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RENNEISEN, PAUL		NAME	WELSCH, JOSEPH	
STREET ADDRESS	3111 NE 57TH CT		STREET ADDRESS	5281 NE 28 AVE	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33308		CITY-ST-ZIP	FT LAUDERDALE FL 33308	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	REESE, KAREN		NAME	TEARBY BOND	
STREET ADDRESS	3110 NE 57TH COURT		STREET ADDRESS	3111 NE 57 ST.	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308		CITY-ST-ZIP	FT LAUDERDALE FL 33308	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WELSCH, JUDI		NAME		
STREET ADDRESS	5281 N.E. 28TH AVE		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALSH, DAVID		NAME		
STREET ADDRESS	5280 NE 28 AVNE		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZOROVICH, GENE		NAME		
STREET ADDRESS	3120 NE 57TH COURT		STREET ADDRESS		
CITY-ST-ZIP	FT.LAUDERDALE, FL 33308		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: JOSEPH P WELSCH TRS 1/14/05 954-7719418
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #