2007 NOT-FOR-PROFIT CORPORATION

20	07 NOT-FOR-PRO ANNUAL	FIT CORPORA' REPORT	TION	1	\[\frac{1}{Jan	/ FILE 08, 2007	D 08:00 AM of State
1. Entity Nam				US#S	ecretary	of State	
THE LAN	DINGS RESIDENTIAL ASSO	CIATION, INC.					
Principal Plac 5281 NE 28 FT. LAUDERD		Mailing Address 5281 NE 28 AVENUE FT. LAUDERDALE, FL 33308	US				
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	6. Name and Address of Current Re	gistered Agent	K . F . W	The mark of the	2 · · · · · · · · · · · · · · · · · · ·	material profession	. चडेन चे का इसके . चडेन चे का इसके
FT. LAUDE	8 AVENUE ERDALE, FL 33308		The state of the s		NOT W	ACE	The state of the s
8. The above the obligat	named entity submits this statement for the tions of registered agent.	e purpose of changing its register	ed office or register	red agent, or bo	oth, in the State of Fic	rida. Tam tamiliar wi	in, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: Registere	nd Agent signature required	when reinstating)		DATE	
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Final Trust Fund Contribution.		.00 May Be ed to Fees			
10.	OFFICERS AND DI	RECTORS	· 如本日本日本	学工	And Traff on the first the state of the stat	Service Company	to the state of th
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D CRANE, DAVID 3121 NE 56 COURT FORT LAUDERDALE, FL 33308		The second secon		and the state of t	The state of the s	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WELSCH, JOSEPH 5281 NE 28 AVENUE FORT LAUDERDALE, FL 33308			The second of th	00000 7078010)578690 -80039-012	61,25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOND, TERRY 3111 NE 57 STREET FORT LAUDERDALE, FL 33308		South to the state of the state		NOTW		Applied of the second of the s
TITLE NAME	P MURRY, TERRI		Topic to the state of the state	KANIN.	THIS SI	PACE	भारता के किया के किया है। इस हो के किया के किया इस हो किया के किया किया किया किया किया किया किया किया

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS 5550 NE 29 AVE

MCCORMICK, TONI

5551 NE 33 AVE

ZOROVICH, GENE

3120 NE 57TH COURT

FT.LAUDERDALE, FL 33308

FORT LAUDERDALE, FL 33308

FORT LAUDERDALE, FL 33308