2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Mar 05, 2007 8:00 am Secretary of State **DOCUMENT #750579** 03-05-2007 90058 025 ****61.25 1. Entity Name THE LANDINGS HOMEOWNERS ASSOCIATION, INC. 40023300 Principal Place of Business Mailing Address 4720 PINE HARRIER DRIVE 4720 PINE HARRIER DRIVE SARASOTA, FL 34231-3359 SARASOTA, FL 34231-3359 2. Principal Place of Business - No P.O. 8ox # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082007 Chg-NP CR2E037 (12/06) City & State Applied For City & State 4. FEI Number 59-2071274 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAYLES, RICAHARD U Street Address (P.O. Box Number is Not Acceptable) **4720 PINE HARRIER DRIVE** SARASOTA, FL 34231-3359 Zip Code FL 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 (NOTE Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE Addition Change BAYLES, RICHARD NAME NAME STREET ADDRESS 4720 PINE HARRIER DR STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34231 CITY - ST - ZIP HILE ☐ Delete TITLE Change Addition NAME FELTMAN, HOWARD NAME 5050 KESTRAL PARK WAY S STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34231 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WILLIAMS, STAN NAME NAME STREET ADDRESS 1735 LANDINGS WAY STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34231 CiTY-ST-ZIP TITLE Delete TITLE ☐ Change Addition JACARUSO, DAVID NAME NAME 1580 LANDINGS TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34231 CITY - ST - ZIP

12. Thereby 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 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.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST- ZIP

CITY-ST-ZIP

SIGNATURE:

LAMPERT, STANLEY

5155 FLICKER FIELD CR

SARASOTA, FL 34231

WHITMAN, WILLIAM

4708 PINE HARRIER DR

SARASOTA, FL 34231

MI

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

RICHARD U. BAYLES TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

☐ Delete

FILED

Change

Change

☐ Addition

Addition