2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000765

FILED Jan 30, 2007 Secretary of State

Entity Name: LAGUNA LANDING OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 5 LAGUNA ST. #105 FORT WALTON BEACH, FL 32548 **Current Mailing Address: New Mailing Address:** 5 LAGUNA ST. #105 FORT WALTON BEACH, FL 32548 FEI Number: 59-3631771 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LANGHAM, CHARLES D 7 LAGUNA STREET, UNIT 307 FORT WALTON BEACH, FL 32548 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LANGHAM, CHARLES D Name: Name: 7 LAGUNA STREET, UNIT 307 Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: Title: Title: (X) Change () Addition () Delete BARKER, RAY Name: BARKER, THOMAS R Name: Address: 5 LAGUNA STREET, UNIT 303 Address: 5 LAGUNA STREET, UNIT 303 City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548 Title: () Delete Title: (X) Change () Addition SHIRLEY, SARAH ARTABASY, GREG Name: Name: 5 LAGUNA STREET, UNIT 302 5 LAGUNA STREET, UNIT 103 Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548 Title: () Delete Title: () Change () Addition MAJORS, CHARLEY Name: Name: 712 PERSIMMON WAY Address: Address: City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: Title: () Delete Title: (X) Change () Addition ADAMS-REISS, RHODA MARSHALL, HELEN Name: Name: 5 LAGUNA STREET, UNIT 101 P.O. BOX 307 Address: Address: BAKER, FL 32531 City-St-Zip: FORT WALTON BEACH, FL 32548 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: THOMAS R. BARKER V 01/30/2007