## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000001318

FILED Mar 24, 2004 Secretary of State

Entity Name: THE LANDING AT CAMP CREEK OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

5365 E. COUNTY HWY, 30-A, #105 SEAGROVE BEACH, FL 32459

**Current Mailing Address: New Mailing Address:** 

5365 E. COUNTY HWY. 30-A, #105 P.O. BOX 4762

SEAGROVE BEACH, FL 32459 SANTA ROSA BEACH, FL 32459

FEI Number: 59-3713022 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

WATSON, FRANKLIN H P.A. BRUNI, ALAN P 5365 E. COUNTY HWY. 30-A, #105 P.O. BOX 4762

SEAGROVE BEACH, FL 32459 SANTA ROSA BEACH, FL 32459 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: ALAN P. BRUNI 03/24/2004

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete (X) Change ( ) Addition

BEAUCHAMP, BRAD WATSON, FRANK Name: Name: 80 CULLMAN AVE. Address: 5365 E. CO. HWY 30-A #105 Address:

City-St-Zip: SEABROVE BEACH, FL 32459 City-St-Zip: SEAGROVE BEACH, FL 32459

Title: () Delete Title: (X) Change ( ) Addition

WATSON, FRANKLIN H Name: MILLER, LINDA Name: Address: 5365 E. COUNTY HWY, 30-A, #105 Address: 5399 E. COUNTY HWY, 30-A, SUITE C-253

City-St-Zip: SEAGROVE BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: DST () Delete Title: (X) Change ( ) Addition

MILLER, LINDA Name: SENNER, GERRY Name:

5399 E. CO. HWY. 30-A, STE. C-253 6426 W. HWY 98 Address: Address: SANTA ROSA BEACH, FL 32459 City-St-Zip: PANAMA CITY BEACH, FL 32407

City-St-Zip:

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: MILLER, BOB 5399 E. CO. HWY 30-A, SUITE C-253 Address: Address:

City-St-Zip: City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: () Delete Title: ( ) Change (X) Addition

WIERZBINSKI, BECKY Name: Name: 747 COOPER DRIVE Address: Address: City-St-Zip: City-St-Zip: LEXINGTON, KY 40502

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK WATSON DPT 03/24/2004