

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2005 08:00 AM
Secretary of State

DOCUMENT # N01000001318

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



Principal Place of Business
 5365 E. COUNTY HWY. 30-A, #105
 SEAGROVE BEACH, FL 32459

Mailing Address
 P.O. BOX 4762
 SANTA ROSA BEACH, FL 32459



04092005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 59-3713022 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

BRUNI, ALAN P
 P.O. BOX 4762
 SANTA ROSA BEACH, FL 32459

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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) 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**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT WATSON, FRANK 5365 E. CO. HWY 30-A #105 SEAGROVE BEACH, FL 32459
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS MILLER, LINDA 5399 E. COUNTY HWY. 30-A, SUITE C-253 SANTA ROSA BEACH, FL 32459
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SENNER, GERRY 6426 W. HWY 98 PANAMA CITY BEACH, FL 32407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, BOB 5399 E. CO. HWY 30-A, SUITE C-253 SANTA ROSA BEACH, FL 32459
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WIERZBINSKI, BECKY 747 COOPER DRIVE LEXINGTON, KY 40502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000300279
 -04/12/05-80008-023 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Alan Bruni* ALAN BRUNI APRIL 9, 2005 1-850-622-0388