

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # N02000002127

1. Entity Name
LAUDERHILL HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**905 LAUDERHILL LANE
FT WALTON BEACH, FL 32547**

Mailing Address
**905 LAUDERHILL LANE
FT WALTON BEACH, FL 32547**



04302008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

11-3678798

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BRANNON, CHRIS
905 LAUDERHILL LANE
FT WALTON BEACH, FL 32547**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

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
**PT
BRANNON, CHRIS
905 LAUDERHILL LANE
FT WALTON BEACH, FL 32547**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**VP
GIBSON, DARWIN JR
905 LAUDERHILL LANE
FT WALTON BEACH, FL 32547**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**S
HARRIS, MARGARET
905 LAUDERHILL LANE
FT WALTON BEACH, FL 32547**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

U000000945854
05/30/08-80025-010 61.25

**DO NOT WRITE
IN THIS SPACE**

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 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:

Chris Brannon **Chris Brannon**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/08 **850.830.1352**

Date

Daytime Phone #