

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02105

1. Entity Name

NORTH LANDING HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

4262 NORTHLAKE BLVD
PALM BEACH GARDENS FL 33410

Mailing Address

4262 NORTHLAKE BLVD
PALM BEACH GARDENS FL 33410

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2536876

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PETERS, H. DUKE II
9676 HEATHER CIR W
PALM BCH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME MCQUAIDE, JOHN G.
STREET ADDRESS 4726 WADITA-KA WAY
CITY-ST-ZIP W. PALM BEACH FL ☐ Delete

TITLE D
NAME SPILANE, MICHAEL
STREET ADDRESS 4666 WADITA-KA WAY
CITY-ST-ZIP W. PALM BEACH FL ☐ Delete

TITLE D
NAME PERKINS, DOTTY
STREET ADDRESS 4584 APPALOOSA ST
CITY-ST-ZIP W. PALM BEACH FL ☐ Delete

TITLE PD
NAME GARRETT, JOE
STREET ADDRESS 4569 WAKITAKA WAY
CITY-ST-ZIP W. PALM BEACH FL ☐ Delete

TITLE D
NAME REDAVID, PATRICIA H
STREET ADDRESS 4557 WAKITAKA WAY
CITY-ST-ZIP W PALM BEACH FL 32417 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD
NAME
STREET ADDRESS
CITY-ST-ZIP 33417 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 33417 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 33417 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 33417 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 33417 ☒ Change ☐ Addition

TITLE D
NAME NUTTING, BRUCE
STREET ADDRESS 4596 APPALOOSA STREET
CITY-ST-ZIP W. PALM BEACH, FL 33417 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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

JOHN G. MCQUAIDE

5/16/01

\$61.626-1460

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90344 039 ****61.25

658932



DO NOT WRITE IN THIS SPACE

0050256

CR2E037 (10/00)