2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2005
Secretary of State

DOCUMENT# N02105

Entity Name: NORTH LANDING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4521 PGA BLVD
BOX 140
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

4521 PGA BLVD
BOX 140
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 59-2536876 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Title:	VPD	( ) Delete
Name:	SPILANE, MICHAEL	
Address:	4666 WADITA-KA WAY	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	PD	( ) Delete
Name:	GARRETT, JOE	
Address:	4569 VADITA-KA WAY	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	D	( ) Delete
Name:	BESS, EULA M	
Address:	4620 APPALOOSA ST.	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	D	( ) Delete
Name:	NUTTING, BRUCE	
Address:	4596 APPALOOSA STREET	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	D	( ) Delete
Name:	FEDINA, PATRICIA	
Address:	4605 WADITA-KAY WAY	
City-St-Zip:	WEST PALM BEACH, FL 33417	
Title:	D	( ) Delete
Name:	LAWRENCE, ROBERTA	
Address:	4716 APPALOOSA STREET	
City-St-Zip:	WEST PALM BEACH, FL 33417	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: H. DUKE PETERS II RA 07/25/2005

Electronic Signature of Signing Officer or Director — Date