


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2008 8:00 am
Secretary of State

02-21-2008 90019 036 ****70.00

DOCUMENT # N05899			
1. Entity Name LANDMARK AT HILLSBORO CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1021 HILLSBORO MILE (A1A) HILLSBORO BEACH FL 33062		Mailing Address 1021 HILLSBORO MILE (A1A) HILLSBORO BEACH FL 33062	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent BUCHER, CHRISTINE 1021 HILLSBORO MILE, #PH2 HILLSBORO BEACH FL 33062		7. Name and Address of New Registered Agent Name: <u>Bibey, Eleanor</u> Street Address (P.O. Box Number is Not Acceptable): <u>1021 Hillsboro Mile, G-2</u> City: <u>Hillsboro Beach</u> FL Zip Code: <u>33062</u>	
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: <u>Eleanor Bibey - Eleanor Bibey</u> DATE: <u>2-4-08</u> <small>Signature typed or printed name of filer should appear on this filing. (NOTE: Registered Agent's name is required when re-registering)</small>			
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MASSENGILL, STEPHANIE 1021 HILLSBORO MILE HILLSBORO BEACH FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Bibey, Eleanor 1021 Hillsboro Mile Hillsboro Beach, FL 33062 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROFES, ED 1021 HILLSBORO MILE HILLSBORO BEACH FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Hernandez, Terry 1021 Hillsboro Mile Hillsboro Beach, FL 33062 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LYONS, RITTA 1021 HILLSBORO MILE HILLSBORO BEACH FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Rita <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LAPIDUS, SHIRLEY 1021 HILLSBORO MILE HILLSBORO BEACH FL 33062 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Ferrara Frank 1021 Hillsboro Mile Hillsboro Beach, FL 33062 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BROOKER, ARNOLD 1021 HILLSBORO MILE HILLSBORO BEACH FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CAPON, SAM 1021 HILLSBORO MILE HILLSBORO BEACH FL 33062 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Rita Lyons RITA LYONS, V.P 2-3-08