


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90195 001 ***122.50

DOCUMENT # N06954

1. Entity Name
THE LANDINGS AT LAKE CAROLINE I, INC.



Principal Place of Business
**1325 W. 12TH STREET
 UNIT C-6
 PANAMA CITY, FL 32401 US**

Mailing Address
**1325 W. 12TH STREET
 UNIT C-7
 PANAMA CITY, FL 32401 US**

66005056



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

02012006 Chg-NP CR2E037 (11/05)

6. Name and Address of Current Registered Agent
BRITTO, S. LOUISE
1325 W. 12TH STREET
C-6
PANAMA CITY, FL 32401

7. Name and Address of New Registered Agent
 Name **S. Louise BRITTO**
 Street Address (P.O. Box Number is Not Acceptable)
1325 W. 12th St. # C-6
 City **Panama City** FL Zip Code **32401**

4. FEI Number
59-2760521

Applied For
 Not Applicable

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 *S. Louise Britto*
 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, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$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 | PD BARNES, CHARLOTTE 1325 W. 12TH STREET, UNIT B4 PANAMA CITY, FL 32401 <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 | VD KENSINGER, KIM 1325 W. 12TH ST., UNIT A-1 PANAMA CITY, FL 32401 <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 | D BRITTO, S. LOUISE 1325 W. 12TH ST., UNIT C-6 PANAMA CITY, FL 32401 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | mb <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD THOMAS, KIMBERLY 1325 W. 12TH ST., UNIT C-5 PANAMA CITY, FL 32401 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD Beverly Berry 1325 W. 12th St. # C-6 Panama City, FL 32401 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <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 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input 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 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: *S. Louise Britto* **3-13-06** **850-763-0911, x4**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #