


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90193 001 ***122.50

DOCUMENT # N06955
 1. Entity Name
THE LANDINGS AT LAKE CAROLINE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
 % ROWLETT W. BRYANT
 833 HARRISON AVENUE
 PANAMA CITY FL 32401 1325 W. 12TH STREET
 UNIT C-7
 PANAMA CITY FL 32401

2. Principal Place of Business 3. Mailing Address
 1325 W. 12th St. 1325 W. 12th St.
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 Unit C-6 Unit C-7

City & State City & State
 Panama City, FL Panama City, FL
 Zip Zip County County
 32401 Bay 32401 Bay


 1st MOORE CR2E037 (10/04)
 4. FEI Number Applied For
 59-2760521 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

BRYANT, ROWLETT W
 833 HARRISON AVE
 PANAMA CITY FL 32401

Name: S. Louise Britto
 Street Address (P.O. Box Number is Not Acceptable): 1325 W. 12th St. #C-7
 City: Panama City FL Zip Code: 32401

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, Managing Director DATE: 4-28-05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By May 1, 2005

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	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SCOTT, CHILDERS		NAME	Charlotte Barnes	
STREET ADDRESS	1325 W. 12TH ST. #B-5		STREET ADDRESS	1325 W. 12th St. #B-1	
CITY-ST-ZIP	PANAMA CITY FL 32401		CITY-ST-ZIP	Panama City, FL 32401	
TITLE	VD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KENSINGER, KIM		NAME		
STREET ADDRESS	1325 W. 12TH ST. #A-1		STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL 32401		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, KIM		NAME		
STREET ADDRESS	1325 W. 12TH ST. #A-1		STREET ADDRESS	1325 W. 12th St. #C-5	
CITY-ST-ZIP	PANAMA CITY FL 32401		CITY-ST-ZIP	Panama City, FL 32401	
TITLE	MD	<input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOUISE, BRITT S		NAME	S. Louise Britto	
STREET ADDRESS	1325 W. 12TH ST. #C-6		STREET ADDRESS		
CITY-ST-ZIP	PANAMA CITY FL 32401		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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: S. Louise Britto, Managing Director DATE: 4-28-05 DAYTIME PHONE #: 850-763-0911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #