

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08831

FILED
Mar 25, 2008
Secretary of State

Entity Name: LANDMARK OAKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5901 U.S. 19 SUITE 7Q
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

5901 U.S. 19 SUITE 7Q
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 59-2539438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHETZEL, TERRI B
905 E. MARTIN LUTHER KING, JR. DR.
SUITE 570
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

QUALIFIED PROPERTY
5901 US HWY 19
SUITE 7 Q
NEW PORT RICHEY, FL 34652 US

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: MARY WHITE

03/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OTTE, RAYMOND F
Address: 3066 LANDMARK BLVD #1302
City-St-Zip: PALM HARBOR, FL 34684 US

Title: D () Delete
Name: BOWLES, JOHN
Address: 3082 LANDMARK BLVD # 1703
City-St-Zip: PALM HARBOR, FL 34684 US

Title: PD () Delete
Name: KARAS, CHRISTOPHER J
Address: 3009 LANDMARK BLVD #301
City-St-Zip: PALM HARBOR, FL 34684 US

Title: SD () Delete
Name: DALTON, ANN M
Address: 3095 LANDMARK BLVD #2001
City-St-Zip: PALM HARBOR, FL 34684 US

Title: VPD () Delete
Name: DOHRMAN, HOWARD J
Address: 3058 LANDMARK BLVD # 1205
City-St-Zip: PALM HARBOR, FL 34684 US

Title: D (X) Delete
Name: COSTELLO, EDWARD J
Address: 3082 LANDMARK BLVD # 1701
City-St-Zip: PALM HARBOR, FL 34684 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: COSTELLO, EDWARD
Address: 5901 US HWY 19 STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: VP (X) Change () Addition
Name: DOHRMAN, HOWARD
Address: 5901 US HWY 19 STE 7Q
City-St-Zip: NEW PORT RICHY, FL 34652 US

Title: STD (X) Change () Addition
Name: BOWLES, JOHN
Address: 5901 US HWY 19 STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: D (X) Change () Addition
Name: SANDHOFF, TOM
Address: 5901 US HWY 19 STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: D (X) Change () Addition
Name: WAITZ, IRA
Address: 5901 US HWY 19 STE 7Q
City-St-Zip: NEW PORT RICHEY, FL 34652 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MARY WHITE

CEO

03/25/2008

Electronic Signature of Signing Officer or Director

Date