

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16532

FILED
Jan 30, 2006
Secretary of State

Entity Name: SOUTHEAST LANDING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9725 SE LANDING PL
TEQUESTA, FL 33469

New Principal Place of Business:

9806 SE LANDING PL
TEQUESTA, FL 33469

Current Mailing Address:

9725 SE LANDING PL
TEQUESTA, FL 33469

New Mailing Address:

9806 SE LANDING PL
TEQUESTA, FL 33469

FEI Number: 65-0192254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARLICH, RICHARD J.
9725 SE LANDING PLACE
TEQUESTA, FL 33469 US

Name and Address of New Registered Agent:

GAGLIARDI, ANN
9806 SE LANDING PLACE
TEQUESTA, FL 33469 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: ANN GAGLIARDI

01/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: GARLICH, RICHARD J.
Address: 9725 SE LANDING PLACE
City-St-Zip: TEQUESTA, FL

Title: SD () Delete
Name: LEHR, CINDY
Address: 9745 SE LANDING PLACE
City-St-Zip: TEQUESTA, FL

Title: PD () Delete
Name: FEE, GARY
Address: 9766 SE LANDING PLACE
City-St-Zip: TEQUESTA, FL

Title: VD (X) Delete
Name: JONES, DARID
Address: 9785 SELANDING PLACE
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GAGLIARDI, ANN V
Address: 9806 SE LANDING PLACE
City-St-Zip: TEQUESTA, FL 33469

Title: SECR (X) Change () Addition
Name: LEHR, CINDY
Address: 9745 SE LANDING PLACE
City-St-Zip: TEQUESTA, FL 33469

Title: TREA (X) Change () Addition
Name: JONES, SUSAN
Address: 9875 SE LANDING PLACE
City-St-Zip: TEQUESTA, FL 33469

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 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: ANN GAGLIARDI

PD

01/30/2006

Electronic Signature of Signing Officer or Director

Date