

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90090 002 ****61.25

DOCUMENT # N33941

1. Entity Name

LANDFALL HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

4007 INDIGO DR
PENSACOLA FL 32507
US

P O BOX 34416
PENSACOLA FL 32507
US

2. Principal Place of Business

3. Mailing Address

4007 AZURE WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

PENSACOLA, FL.

Zip

Country

Zip

Country

32507

4. FEI Number

59-3123741

Applied For

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

WILDES, DUNLEY
4001 LANDFALL DR
PENSACOLA FL 32507

Name DEBORAH M. WATERS

Street Address (P.O. Box Number is Not Acceptable)
6200 DON CARLOS DR.

City PENSACOLA,

FL

Zip Code
32507

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.

SIGNATURE

Deborah M. Waters

DEBORAH M. WATERS

4/10/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PATTERSON, FRED 4007 INDIGO DR. PENSACOLA FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP ARNOLD, HENRY 4022 INDIGO DRIVE PENSACOLA FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT GUSTAFSON, DENISE 4020 TEAL WAY PENSACOLA FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WILDES, DUDLEY 4001 LANDFALL DRIVE PENSACOLA FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FECKO, FRAN 4039 TEAL WAY PENSACOLA FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPRES. GLENN POSEY 4007 AZURE WAY PENSACOLA, FL 32507	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP. ALLEN EVANS 4028 TEAL WAY PENSACOLA, FL 32507	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTREAS. VICTORIA BUTTS TAMARQUEISE DR. PENSACOLA, FL 32507	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSEC. JOHN HAROLD 4004 AZURE WAY PENSACOLA, FL 32507	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. ROBERT MANSKE 4041 MOONRAKER PENSACOLA, FL 32507	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

Deborah M. Waters
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02

Date

Daytime Phone #

CR2E037 (9/01)