2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33941

FILED Jul 09, 2007 Secretary of State

Entity Name: LANDFALL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4025 AZURE WAY PENSACOLA, FL 32507 US **Current Mailing Address: New Mailing Address:** P O BOX 34416 PENSACOLA, FL 32507 US FEI Number: 59-3123741 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WATERS, DEBORAH M 6200 DON CHARLES DRIVE PENSACOLA, FL 32507 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BALL, MIKE THOMPSON, KELLEY Name: Name: 4025 AZURE WAY Address: 4060 MOONRAKER DR Address: City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507 Title: Title: (X) Change () Addition () Delete CLARKE, VICKI Name: PYLE, TIMOTHY Name: Address: 4005 LANDFALL DRIVE Address: 4018 AZURE WAY City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507 () Delete Title: Title: (X) Change () Addition THOMPSON, KELLY EVANS, ALLEN Name: Name: 4060 MOONRAKER Address: Address: 4028 TEAL WAY City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507 Title: () Delete Title: (X) Change () Addition THOMPSON, KELLY Name: Name: EVANS, ALLEN 4060 MOONRAKER Address: Address: 4028 TEAL WAY City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507 Title: () Delete Title: (X) Change () Addition PYLE, TIMOTHY KERRIGAN, DEBORAH Name: Name: 4018 AZURE WAY 4006 INDIGO DR Address: Address: City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507 Title: () Delete Title: () Change (X) Addition HAMILTON, JEAN Name: Name: Address: Address: 4031 TEAL WAY PENSACOLA, FL 32507 City-St-Zip: 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: DEBORAH WATERS RA 07/09/2007