

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90286 031 ****61.25

DOCUMENT # N33941

1. Entity Name

LANDFALL HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**4007 AZURE WAY
PENSACOLA FL 32507
US**

Mailing Address

**P O BOX 34416
PENSACOLA FL 32507
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3123741**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**WATERS, DEBORAH M
6200 DON CHARLES DRIVE
PENSACOLA FL 32507**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

DEBORAH M WATERS
(NOTE: Registered Agent signature required when reinstating)

1/17/03
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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DP	☐ Delete
NAME	POSEY, GLENN	
STREET ADDRESS	4007 AZURE WAY	
CITY-ST-ZIP	PENSACOLA FL 32507	
TITLE	DVP	☐ Delete
NAME	EVANS, ALLEN	
STREET ADDRESS	4028 TEAL WAY	
CITY-ST-ZIP	PENSACOLA FL 32507	
TITLE	DT	☐ Delete
NAME	BUTTS, VICTORIA	
STREET ADDRESS	TURQUOISE WAY	
CITY-ST-ZIP	PENSACOLA FL 32507	
TITLE	DS	☐ Delete
NAME	HAROLD, JOHN	
STREET ADDRESS	4004 AZURE WAY	
CITY-ST-ZIP	PENSACOLA FL 32507	
TITLE	D	☐ Delete
NAME	MANSKE, ROBERT	
STREET ADDRESS	4041 MOONRAKER	
CITY-ST-ZIP	PENSACOLA FL 32507	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	☒ Change ☐ Addition
NAME	ALLEN EVANS	
STREET ADDRESS	4028 TEAL WAY	
CITY-ST-ZIP	PENSACOLA, FL 32507	
TITLE	DVP	☒ Change ☐ Addition
NAME	JOE BALDI	
STREET ADDRESS	511 N. 19th AVE	
CITY-ST-ZIP	PENSACOLA, FL 32501	
TITLE	DT	☐ Change ☐ Addition
NAME	VICKI BUTTS	
STREET ADDRESS	4008 TURQUOISE WAY	
CITY-ST-ZIP	PENSACOLA, FL 32507	SAME
TITLE	DS	☒ Change ☐ Addition
NAME	NANCY MCCORT	
STREET ADDRESS	4037 LANDFALL DR	
CITY-ST-ZIP	PENSACOLA, FL 32507	
TITLE	D	☐ Change ☐ Addition
NAME	GLENN POSEY	
STREET ADDRESS	4007 AZURE WAY	
CITY-ST-ZIP	PENSACOLA, FL 32507	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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: **ALLEN EVANS REPRESENTED** *Allen Evans* **1/29/03**

CR2E037 (10/02)