

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34506

FILED
Mar 16, 2009
Secretary of State

Entity Name: EAST LANDING AT ROCK CREEK HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5722 S. FLAMINGO RD
PMB 134
COOPER CITY, FL 333303206 US

New Principal Place of Business:

Current Mailing Address:

5722 S. FLAMINGO RD
PMB 134
COOPER CITY, FL 333303206 US

New Mailing Address:

FEI Number: 65-0151205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KILLINGSWORTH, CHARLES W
3605 STARBOARD AVE
COOPER CITY, FL 33026 US

Name and Address of New Registered Agent:

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:

Title: V () Delete
Name: COS, ROBIN
Address: 11309 PORT STREET
City-St-Zip: COOPER CITY, FL 33026

Title: D () Delete
Name: FINGERHUT, MITCHELL
Address: 11312 PORT STREET
City-St-Zip: COOPER CITY, FL 33026

Title: S () Delete
Name: GUZMAN, FRED
Address: 3711 STARBOARD AVE
City-St-Zip: HOLLYWOOD, FL 33026

Title: T () Delete
Name: TORRES, JOSE
Address: 11307 PORT STREET
City-St-Zip: COOPER CITY, FL 33026

Title: D () Delete
Name: GUZMAN, FRED
Address: 3711 STARBOARD AVE
City-St-Zip: COOPER CITY, FL 33026

Title: D () Delete
Name: HOCHMAN, JEFF
Address: 11300 KNOT WAY
City-St-Zip: COOPER CITY, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: KILLINGSWORTH, CHARLES W
Address: 3605 STARBOARD AVE
City-St-Zip: COOPER CITY, FL 33026

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

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

Title: D (X) Change () Addition
Name: HANSRAJ, ADRIAN
Address: 3607 STARBOARD AVE
City-St-Zip: COOPER CITY, FL 33026

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: CHARLES W. KILLINGSWORTH

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date