

SECTION NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

97 NOV 10 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N37749 (1)

1. Corporation Name

LANDOVER HILLS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

C/O THOMAS, CYNTHIA
1340 LANDOVER PLACE
TALLAHASSEE FL 32311
US

C/O THOMAS, CYNTHIA
1340 LANDOVER PLACE
TALLAHASSEE FL 32311
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/20/1990

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

21 C/O Richard Friedman

2a. Mailing Address

26 Same

4. FEI Number

59-3017882

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 6640 Landover Circle

27

City & State

City & State

23 Tallahassee, FL 32311

28

Zip

Country

Zip

Country

24 32311

25

USA

29

30

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THOMAS, CYNTHIA
1340 LANDOVER PLACE
TALLAHASSEE FL 32311

81 Name

Friedman, Richard

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

6640 Landover Circle

83

84 City

Tallahassee

FL

85 Zip Code

32311

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME NOBLES, DENNIS
STREET ADDRESS 6631 LANDOVER CIRC
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME HANSEN, SCOTT
STREET ADDRESS 6722 LANDOVER CIR
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME NOBLES, VICKI
STREET ADDRESS 6631 LANDOVER CIR
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME THOMAS, CYNTHIA
STREET ADDRESS 1340 LANDOVER PLACE
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME President/D
Richard Friedman
1.3 STREET ADDRESS 6640 Landover Circle
1.4 CITY-ST-ZIP Tallahassee, FL 32311

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME V. Pres./D
Camille Graves
2.3 STREET ADDRESS 6644 Landover Circle
2.4 CITY-ST-ZIP Tallahassee, FL 32311

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME Secretary/D
Brenda Buchan
3.3 STREET ADDRESS 6632 Landover Circle
3.4 CITY-ST-ZIP Tallahassee, FL 32311

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME Treasurer/D
Elyse Brodeur
4.3 STREET ADDRESS 6644 Landover Circle
4.4 CITY-ST-ZIP Tallahassee, FL 32311

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE SIGNATURE REQUIRED

11/10 61.25

CR2E037 (4/97)