

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 20, 2009
Secretary of State**

DOCUMENT# N49832

Entity Name: FALLBROOK AT LANSBROOK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O SEABOARD ARBORS MGMT SVC INC
2189 CLEVELAND ST STE 225
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

C/O SEABOARD ARBORS MGMT SVC INC
2189 CLEVELAND ST STE 225
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 59-3179020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIGHTON, LENNARD A
C/O SEABOARD ARBORS MGMT SVC INC
2189 CLEVELAND ST STE 225
CLEARWATER, FL 33765 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: D () Delete
Name: SHARP, STEVE
Address: 4486 FALLBROOK BOULEVARD
City-St-Zip: PALM HARBOR, FL 34685

Title: PD () Delete
Name: HATTON, DON
Address: 4706 TAMWORTH DR
City-St-Zip: PALM HARBOR, FL 34685

Title: VPD () Delete
Name: NASH, MIKE
Address: 4455 FALLBROOKDRIVE
City-St-Zip: PALM HARBOR, FL 34685

Title: TD () Delete
Name: LATTANZIO, ELLEN
Address: 4910 KYLEMORE CT
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: SCHULTZ, RON
Address: 4423 FALLBROOK BLVD
City-St-Zip: PALM HARBOR, FL 34685

Title: SD () Delete
Name: CORRENTE, CHERYL
Address: 4941 KYLEMORE COURT
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: POLLACK, DAVE
Address: 4440FALLBROOK BOULEVARD
City-St-Zip: PALM HARBOR, FL 34685

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

Title: VPTD (X) Change () Addition
Name: NASH, MIKE
Address: 4455 FALLBROOK BLVD
City-St-Zip: PALM HARBOR, FL 34685

Title: D (X) Change () Addition
Name: LATTANZIO, ELLEN
Address: 4910 KYLEMORE CT
City-St-Zip: PALM HARBOR, FL 34685

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

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: DON HATTON

PD

01/20/2009

Electronic Signature of Signing Officer or Director

_____ Date