


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90050 023 ****61.25

DOCUMENT # N49956			
1. Entity Name LAUREL LANDINGS ESTATES HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business 1626 LANDFALL DRIVE NOKOMIS FL 34275 US		Mailing Address P O BOX 150 NOKOMIS FL 34274-0150 US	
2. Principal Place of Business 1620 Landfall Drive		3. Mailing Address Same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Nokomis, Fl 34275		City & State	
Zip 34275		Country USA	
4. FEI Number 65-0478267		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HARRISON, RONALD L 1113 KINGSWAY DRIVE NOKOMIS FL 34275		7. Name and Address of New Registered Agent Name Dr. Robert Felman Street Address (P.O. Box Number is Not Acceptable) 887 Morgantown Way Venice, FL 34293 City Venice Zip Code FL 34293	
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 Dr. Robert Felman		<i>Robert Felman, M.D.</i> 2/8/06	
<small>Signature, typed or printed name of registered agent and title if applicable</small>		<small>(NOTE: Registered Agent signature required when reissuing) DATE</small>	
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HARRISON, RONALD L 1113 KINGSWAY DRIVE NOKOMIS FL 34275 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Dr. Robert Felman 887 Morgantown Way Venice, FL 34293 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD DAVIS, BONNIE 1613 LANDFALL DR NOKOMIS FL 34275 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Rona Jaffe 1101 Kings Way Dr Nokomis, FL 34275 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SCOTT, TOM 1626 LANDFALL DR NOKOMIS FL 34275 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Mark S. O'Connor 1620 Landfall Drive Nokomis Fl 34275 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD WINICK, SHARYN 1159 KINGS WAY DR, NOKOMIS FL 34275 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Same <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIR RICH, JIM 1619 JACANA COURT NOKOMIS FL 34275 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	position not filled <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIR FARINA, DONNA 1109 KINGSWAY DRIVE, NOKOMIS FL 34275 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Same <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Mark S O'Connor* **02-06-06 941-488 4955**