

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90135 034 ****61.25

DOCUMENT # N93000005818

1. Entity Name
LANSING RIDGE II HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**314 LAURIE ST.
MELBOURNE, FL 32935 US**

Mailing Address
**314 LAURIE ST.
MELBOURNE, FL 32935 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03012006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-3155046

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HILL ACCOUNTING
314 LAURIE ST.
MELBOURNE, FL 32935**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
ZARATE, CARLOS
2457 WOLF CREEK DR.
MELBOURNE, FL 32935** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Kim Satterfield
1930 Blue Ridge Ave.
Melbourne, FL 32935** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BATTIG, JENNY
2110 BUESCHER HILL
MELBOURNE, FL 32935** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
Jenny Battig
2110 Buescher Hill
Melbourne, FL 32935** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SATTERFIELD, KIM
1930 BLUE RIDGE AVENUE
MELBOURNE, FL 32935** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Tammy Mygrant
1919 Blue Ridge Ave.
Melbourne, FL 32935** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
JOHNSTON, BARRY
2137 LANSING ST.
MELBOURNE, FL 32935** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
Connie Miller
2005 Lansing Street
Melbourne FL 32935** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
TAYLOR, ROGER
2002 BUSCHER HILL ST
MELBOURNE, FL 32935** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Rick Silbert
1911 Blue Ridge Ave
Melbourne, FL 32935** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MILLER, CONNIE
2005 LANSING STREET
MELBOURNE, FL 32935** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Greg Hunley
2075 Buescher Hill St.
Melbourne, FL 32935** ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Kimberley Satterfield
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/06
Date

Daytime Phone #