

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005818

FILED
Mar 06, 2009
Secretary of State

Entity Name: LANSING RIDGE II HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

314 LAURIE ST.
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

314 LAURIE ST.
MELBOURNE, FL 32935 US

New Mailing Address:

FEI Number: 59-3155046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILL ACCOUNTING
314 LAURIE ST.
MELBOURNE, FL 32935 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: P () Delete
Name: SIBERT, RICK
Address: 1911 BLUE RIDGE AVE.
City-St-Zip: MELBOURNE, FL 32935

Title: T () Delete
Name: JOHNTSTON, BARRY
Address: 2137 LAHSING ST
City-St-Zip: MELBOURNE, FL 32935

Title: S () Delete
Name: HARMAN, TERRI
Address: 2060 SIERRA STREET
City-St-Zip: MELBOURNE, FL 32935

Title: D (X) Delete
Name: MAGNUSON, JEANNETTE
Address: 1919 BLUE RIDGE AVE.
City-St-Zip: MELBOURNE, FL 32935

Title: V () Delete
Name: HUNLEY, GREG
Address: 2075 BUESCHER HILL ST
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: JOHNSTON, BARRY
Address: 2137 LANSING ST
City-St-Zip: MELBOURNE, FL 32935

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

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

Title: V (X) Change () Addition
Name: HUNLEY, GREG
Address: 2075 BUESCHER HILL ST
City-St-Zip: MELBOURNE, FL 32935

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: BARRY JOHNSTON

T

03/06/2009

Electronic Signature of Signing Officer or Director

Date