## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Mar 04, 2005 8:00 am Secretary of State **DOCUMENT # N97000001215** 1. Entity Name 03-04-2005 90095 049 \*\*\*\*61.25 SUSAN'S LANDING HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address PREMIER COMMUNITY MGRS INC 1255 BELLA AVE., STE 167 WINTER SPRINGS FL 32708 PREMIER COMMUNITY MGRS INC 1255 BELLA AVE., STE 167 WINTER SPRINGS FL 32708 50022601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State Applied For City & State 4. FFI Number 59-3431792 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HOUSE, GARY Street Address (P.O. Box Number is Not Acceptable) C/O PREMIER COMMUNITY MGRS INC 1255 BELLA AVE., STE 167 WINTER SPRINGS FL 32708 City 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS youglas way PD Asbell, TITLE ☐ Delete Addition TITLE MARKESE, ANTHONY NAME NAME 11950 GRACE'S WAY STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY - ST - ZIP CITY-ST-ZIP Delete Addition Change TITLE TITLE FEDELER, FRITZ NAME NAME 11510 GRACE'S WAY STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-ZIP TD: \_\_ - 🖃 - Defeta TITLE ☐ Addition THEF BARKUS, ROBERT NAME NAME 11900 GRACE'S WAY STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-ZIP VPD Change Addition ☐ Detete TITLE CHRISTIAN, ROD NAME NAME 11513 GRACE'S WAY STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TIT1 F MUZIA, LARRY NAME 11230 CROCKED RIVER CT. STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-7IP CITY-ST-ZIP SD Detete TITLE TiTLE Change ☐ Addition PROBST, KELLY NAME NAME 11310 SWAN'S POINT DR. STREET ADDRESS STREET ADDRESS CLERMONT FL 34711 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 the 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 explowered.

ANTHON, MARKESE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR

FILED