

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 24, 2009  
Secretary of State**

DOCUMENT# 725300

Entity Name: LORRAINE CONDOMINIUM, INC.

**Current Principal Place of Business:**

410 SOUTHEAST 4TH AVENUE  
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

410 SOUTHEAST 4TH AVENUE  
HALLANDALE BEACH, FL 33009

**New Mailing Address:**

FEI Number: 59-1648561      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MANNO, JOAN M.  
2500 EAST HALLANDALE BEACH BLVD., STE. 319  
HALLANDALE, FL 33009      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: CANATSELOS, ANNA  
Address: 410 SE 4TH AVE #7  
City-St-Zip: HALLANDALE, FL 33009

Title: ST      ( ) Delete  
Name: WILLIAM, MAZZIO  
Address: 410 SE 4TH AVE #8  
City-St-Zip: HALLANDALE, FL 33009

Title: V      ( ) Delete  
Name: CANATSELOS, CHARLES  
Address: 410 SE 4TH AVE #7  
City-St-Zip: HALLANDALE, FL 33009

Title: D      ( ) Delete  
Name: MALISE, SUZETTE  
Address: 410 SE 4 AVE #5  
City-St-Zip: HALLANDALE, FL 33009

Title: D      ( ) Delete  
Name: LAGUNA, MARIA  
Address: 410 SE 4TH AVE #3  
City-St-Zip: HALLANDALE, FL 33009

Title: D      ( ) Delete  
Name: DENNETT, JENNIE  
Address: 410 SE 4 AVE # 4  
City-St-Zip: HALLANDALE, FL 33009

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: ST      (X) Change ( ) Addition  
Name: WILLIAM, MAZZIO  
Address: 410 SE 4TH AVE #9  
City-St-Zip: HALLANDALE, FL 33009

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

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

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: WILLIAM MAZZIO

ST

01/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date