


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90054 041 ****70.00

DOCUMENT # N05000009894

1. Entity Name
 1377 SOUTH LEAVITT AVENUE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
 1377 S LEAVITT AVE
 SUITE 103
 ORANGE CITY, FL 32763

Mailing Address
 690 A EAST RHODE ISLAND AVENUE
 ORANGE CITY, FL 32763

00023034



2. Principal Place of Business - No P.O. Box #
 1377 S. Leavitt Ave
 Suite, Apt. #, etc.
 Suite 103
 City & State
 Orange City, Fl.
 Zip
 32763
 Country
 USA

3. Mailing Address
 1377 S. Leavitt Ave
 Suite, Apt. #, etc.
 Suite 103
 City & State
 Orange City, Fl.
 Zip
 32763
 Country
 USA

03152007 Chg-NP CR2E037 (12/06)

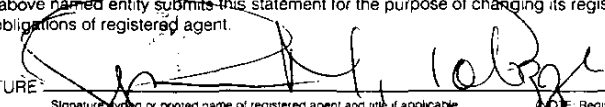
4. FEI Number
 59-3821977
 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 BOOKER, KIM C
 2582 SOUTH VOLUSIA AVENUE
 ORANGE CITY, FL 32763

7. Name and Address of New Registered Agent
 Name Polizzi, Lynnea M.
 Street Address (P.O. Box Number is Not Acceptable)
 1377 S. Leavitt Ave. Suite 103
 City Orange City FL Zip Code 32763

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:  DATE: 3-21-07

Signature typed or printed name of registered agent and title if applicable. Registered Agent signature required when reinstating.

Filing Fee is \$61.25 Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

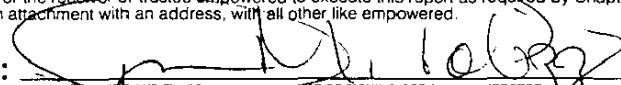
10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	BERRY, SEAN	
STREET ADDRESS	1377 S LEAVITT UNIT 101	
CITY-ST-ZIP	ORANGE CITY, FL 32763	
TITLE	P	<input type="checkbox"/> Delete
NAME	POLIZZI, LYNNEA M	
STREET ADDRESS	1377 UNIT 103 & 104, S. LEAVITT AVE	
CITY-ST-ZIP	ORANGE CITY, FL 32763	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	BERRY, SEAN	
STREET ADDRESS	1377 UNIT 101 S. LEAVITT AVE	
CITY-ST-ZIP	ORANGE CITY, FL 32763	
TITLE	ST	<input type="checkbox"/> Delete
NAME	ALICEA, LUANA P	
STREET ADDRESS	1377 S. LEAVITT AVE UNIT 102	
CITY-ST-ZIP	ORANGE CITY, FL 32763	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

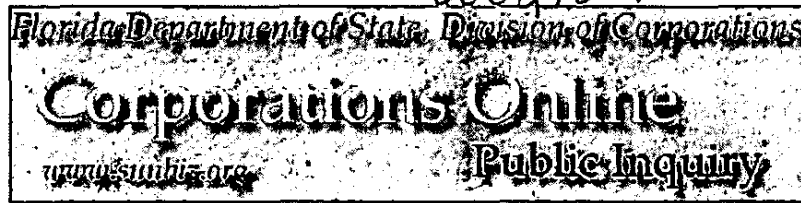
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Berry, Sean	
STREET ADDRESS	1377 S. Leavitt Ave. # 101	
CITY-ST-ZIP	Orange City, Fl. 32763	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Alicea, Luana P.	
STREET ADDRESS	1377 S. Leavitt Ave # 102	
CITY-ST-ZIP	Orange City, Fl. 32763	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:  DATE: 3-21-07 DAYTIME PHONE #: 386-774-8244

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

60029034



Florida Non Profit

1377 SOUTH LEAVITT AVENUE CONDOMINIUM ASSOCIATION, INC.

PRINCIPAL ADDRESS

1377 S LEAUITT AVE
 SUITE 103
 ORANGE CITY FL 32763
 Changed 03/15/2006

MAILING ADDRESS

690 A EAST RHODE ISLAND AVENUE
 ORANGE CITY FL 32763

Document Number
 N05000009894

FEI Number
 593821977

Date Filed
 09/23/2005

State
 FL

Status
 ACTIVE

Effective Date
 NONE

Registered Agent

Name & Address
BOOKER, KIM C 2582 SOUTH VOLUSIA AVENUE ORANGE CITY FL 32763

Officer/Director Detail

Name & Address	Title
BERRY, SEAN 1377 S LEAUITT UNIT 101 ORANGE CITY FL 32763	VP
POLIZZI, LYNNEA M 1377 UNIT 103 & 104, S. LEAVITT AVE ORANGE CITY FL 32763	P
BERRY, SEAN 1377 UNIT 101 S. LEAVITT AVE ORANGE CITY FL 32763	ST

#N05000009894

ALICEA, LUANA P 1377 S. LEAUITT AVE UNIT 102 ORANGE CITY FL 32763	ST
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Annual Reports

Report Year	Filed Date
2006	03/15/2006

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No Events
No Name History Information

Document Images

Listed below are the images available for this filing.

03/15/2006 -- ANN REP/UNIFORM BUS REP
09/23/2005 -- Domestic Non-Profit

THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT

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