

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005410

FILED
Mar 13, 2009
Secretary of State

Entity Name: LOFTS AT MAYFAIR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3737 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Principal Place of Business:

3339 VIRGINIA STREET
MIAMI, FL 33133

Current Mailing Address:

3737 COLLINS AVENUE
MIAMI BEACH, FL 33140

New Mailing Address:

3339 VIRGINIA STREET
MIAMI, FL 33133

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: PD () Delete
Name: CHRISTA, DAVID F
Address: 3737 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33140

Title: TD () Delete
Name: CHRISTA, FRANK
Address: 3737 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33140

Title: SD () Delete
Name: CASEY, JOHN
Address: 3737 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHRISTA, DAVID F
Address: 119 VICTOR HEIGHTS PARKWAY
City-St-Zip: VICTOR, NY 14564

Title: TD (X) Change () Addition
Name: CHRISTA, FRANK
Address: 119 VICTOR HEIGHTS PARKWAY
City-St-Zip: VICTOR, NY 14564

Title: SD (X) Change () Addition
Name: LOCKHART, JOSE
Address: 6555 N.W. 36 ST # 318
City-St-Zip: MIAMI, FL 33166

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: JOSE LOCKHART

SD

03/13/2009

Electronic Signature of Signing Officer or Director

Date