2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED May 16, 2008 8:00 am Secretary of State

Daytime Phone #

| 1. Entity Nam | MENT# 705586 LVANIA CONDOMINIUM A | 05-10 | 5-2008 90019 0 | 26 ****61.25 | > | | | |
|---|--|---|---------------------------------------|--|---|----------------------------|---------------|--|
| Principal Place of Business 500 NE SPANISH RIVER BLVD STE 18 BOCA RATON, FL 33431 US 2. Principal Place of Business - No P.O. Box # | | Meiling Address 500 NE SPANISH RIVER BLVD STE #18 BOCA RATON, FL 33431 US | | | | | | |
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| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 01142008 Ch | g-NP CR2 | 2E037 (12/06) | | |
| City & State | | City & State | | 4. FEI Number 59-2769588 | 4. FEI Number Applied For 59-2769588 Not Applicable | | | |
| Zip | Country | Zip | Country | 5. Certificate of Sta | tus Desired 🔲 | \$8.75 Add Fee Required | litional d | |
| | 6. Name and Address of Current | Registered Agent | Name | 7. Name and Addr | ess of New Register | | | |
| WILLIS, ERNEST W C/O BEACON PROPERTY MGMT ., INC. 500 NE SPANISH RIVER BLVD. #18 BOCA RATON, FL 33431 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | | | City | | | FL Zip Code | e | |
| 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 re | equired when reinstaling) | - | | | |
| | Filing Fee Is \$61.25 Due by May 1, 2008 | 9. Election Campaign Financing Trust Fund Contribution. | | \$5.00 May Be Added to Fees | | | | |
| 10. | OFFICERS AND DI | | 11. | ADDITIONS/CHANGE | S TO OFFICERS AND | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | YOUNG, GEORGE 1511 SE 15 CT 405 DEERFIELD BEACH, FL 33441 | ☐ Delete | NAME STREET ADDRESS CITY-ST-ZIP | | | . Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P/D FORMICOLA, MARILYN 1511 SE 15TH COURT, #102 DEERFIELD BEACH, FL 33441 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | ☐ Addition | |
| TITLE, NAME STREET ADDRESS CITY-ST-ZIP | TD MAYOL, HECTOR 1511 SE 15 COURT #306 DEERFIELD BEACH, FL 33441 | ☐ Deficte | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V/D JUNEMAN, NINA 1511 SE 15TH CT #301 DEERFIELD BEACH, FL 33441 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S/D VALESTIN, LINDA 1511 SE 15TH COURT, #502 DEERFIELD BEACH, FL 33441 | Æ l Delete | NAME | ALLEN LEILA 1511 SE 15 (DEERFIELD | CT # 103 | □ Change 33441 | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LOECHER, JOHN 151 SE 15 CT #305 DEERFIELD BEACH, FL 33441 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | ☐ Addition | |
| 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 an other like empowered. | | | | | | | | |