

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726803

FILED
Jan 06, 2009
Secretary of State

Entity Name: LIGHTHOUSE HARBOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2921 N.E. 28TH ST. #104
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

2921 N.E. 28TH ST. #104
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 59-1595684 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LINVILLE, MARSHA
2921 NE 28TH STREET
#104
LIGHTHOUSE POINT, FL 33064 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: DMBR () Delete
Name: HOFMANN, DAVE
Address: 2921 NE 28TH STREET, APT. 403
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: S () Delete
Name: VASU, BONNIE
Address: 2921 NE 28TH STREET APT. 204
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: T () Delete
Name: SCHNEIDER, CAROLYN
Address: 2921 NE 28TH STREET STE 202
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: VP () Delete
Name: NEWHOUSE, JOSEPH
Address: 2921 NE 28 ST, 303
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: P () Delete
Name: LINVILLE, MARSHA
Address: 2921 NE 28 ST., APT 104
City-St-Zip: LIGHTHOUSE POINT, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: MARSHA LINVILLE

P

01/06/2009

Electronic Signature of Signing Officer or Director

_____ Date