2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2009
Secretary of State

DOCUMENT# 728194

Entity Name: THE LAUDERDALE LANDINGS CONDOMINIUM, INC.

Current Principal Place of Business:

5495 N.E. 25TH AVE.
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5495 N.E. 25TH AVE.
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-1809316 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCLELLAN, GARY E
5495 NE 25TH AVE
#402
FT. LAUDERDALE, FL 33308 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: VP ( ) Delete
Name: CUNNINGHAM, LEANN
Address: 5495 NE 25 AVE 206
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: S ( ) Delete
Name: LUGO, PATRICIA
Address: 5495 NE 25TH AVE SUITE 400
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: P ( ) Delete
Name: MCCLELLAN, GARY
Address: 5495 NE 25 AVE., #402
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: D ( ) Delete
Name: TOWNSEND, LISA J
Address: 5495 NE 25 AVE 201
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: T ( ) Delete
Name: FLAVIO, PREGO
Address: 5495 NE 25 AVE #500
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: TOWNSEND, LISA
Address: 5495 NE 25 AVE 201
City-St-Zip: FORT LAUDERDALE, FL 33308

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

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

Title: D (X) Change ( ) Addition
Name: CUNNINGHAM, LEEANN
Address: 5495 NE 25 AVE 206
City-St-Zip: FORT LAUDERDALE, FL 33308

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: GARY E. MCCLELLAN P 03/10/2009

Electronic Signature of Signing Officer or Director — Date