

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742342

FILED
Apr 29, 2008
Secretary of State

Entity Name: LOCHMOOR ON-THE-GREEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% AMERICAN CONDO MGMT
POB 100399
CAPE CORAL, FL 33910

New Principal Place of Business:

% AMERICAN CONDO MGMT
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914

Current Mailing Address:

% AMERICAN CONDO MGMT
POB 100399
CAPE CORAL, FL 33910

New Mailing Address:

FEI Number: 59-1800793 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASE, SUSAN CAM
C/O AMERICAN CONDOMGMT INC
615 CAPE CORAL PKWY W 103
CAPE CORAL, FL 33914 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: VD () Delete
Name: UNDERWOOD, LLOYD
Address: 5917 LITTLE STONE CT
City-St-Zip: N FT MYERS, FL

Title: D () Delete
Name: MASCHENIK, VIRGINIA
Address: 5917 LITTELSTONE CT SUITE 211
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: D () Delete
Name: REMY, JUNE
Address: 5917 LITTLESTONE CRT 101
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: ST () Delete
Name: DELLA, KOTTKE
Address: 5917 LITTLESTONE CT.
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: PD () Delete
Name: HERBST, GEORGE R
Address: 5917 LITTLESTONE CT. #119
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: MASCHENIK, VIRGINIA
Address: 5917 LITTELSTONE CT SUITE 211
City-St-Zip: NORTH FORT MYERS, FL 33903

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

Title: D (X) Change () Addition
Name: REIMER, JAMES
Address: 5917 LITTLESTONE CT.
City-St-Zip: NORTH FORT MYERS, FL 33903

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: GEORGE HERBST

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date