2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753416

FILED Apr 30, 2007 Secretary of State

Entity Name: THE LORI-LYNN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

725 HUMMINGBIRD WAY NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

725 HUMMINGBIRD WAY NORTH PALM BEACH, FL 33408

FEI Number: 59-2206633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KUHARCIK, JOSEPH ESQ 1211 THE PLAZA WEST PALM BEACH, FL 33404 US

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:

- Flateria Circulus I Davidoud Acad

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: BM (X) Change () Addition
Name: ROESCH, GREGG S Name: ROESCH, GREGG S
Address: 7010 BARBOUR RD Address: 7010 BARBOUR RD

City-St-Zip: WEST PALM BEACH, FL 33403 City-St-Zip: WEST PALM BEACH, FL 33403

Title: PD () Delete Title: BM (X) Change () Addition Name: HARRISON, BRIAN Name: ROWE, ELIZABETH

Address: 725 HUMMINGBIRD WAY 101 Address: 725 HUMMINGBIRD WAY 111
City-St-Zip: NORTH PALM BEACH, FL City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VPD () Delete Title: BM (X) Change () Addition Name: LEAMING, MARK
Name: LEAMING, MARK

Address: 725 HUMMINGBIRD WAY
City-St-Zip: N. PALM BEACH, FL City-St-Zip: N. PALM BEACH, FL

Title: D () Delete Title: BM (X) Change () Addition Name: MARCHETTI, ROSE Name: MARCHETTI, ROSE

 Name:
 MARCHETTI, ROSE
 Name:
 MARCHETTI, ROSE

 Address:
 725 HUMMINGBIRD WAY
 Address:
 725 HUMMINGBIRD WAY

 City-St-Zip:
 N. PALM BEACH, FL
 City-St-Zip:
 N. PALM BEACH, FL

 Name:
 HARGIS, JOEL
 Name:

 Address:
 8031 VIA HOCIENDS
 Address:

 City-St-Zip:
 PALM BEACH GARDENS, FL 33418
 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: ELIZABETH ROWE BM 04/30/2007