

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762326

Entity Name: LUANI PLAZA, INC.

FILED
May 11, 2007
Secretary of State

Current Principal Place of Business:

1440 KENNEDY DR.
#11
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

1440 KENNEDY DR.
#11
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 65-0270637 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MITCHELL J. COOK, P.A.
3706 N. ROOSEVELT BLVD., SUITE I
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

MITCHELL J. COOK, P.A.
24171 OVERSEAS HIGHWAY, SUITE 2
SUMMERLAND KEY, FL 33042 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: _____

05/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WINNICKI, ALISON
Address: 1440 KENNEDY DR.
City-St-Zip: KEY WEST, FL 33040

Title: VPD () Delete
Name: OROPEZA, STEPHEN
Address: 1450 KENNEDY DR.
City-St-Zip: KEY WEST, FL 33040

Title: SEC () Delete
Name: WILLIAM, GOLDNER E DDS
Address: 1460 KENNEDY DRIVE
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: FULLER, NORMAN
Address: 1432 KENNEDY DRIVE
City-St-Zip: KEY WEST, FL 33040

Title: TREA () Delete
Name: WALKER, ROBERT G
Address: 1434 KENNEDY DR.
City-St-Zip: KEY WEST, FL 33040

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: ROBERT G. WALKER

TREA

05/11/2007

Electronic Signature of Signing Officer or Director

Date