## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#763895** 

FILED Jan 29, 2009 Secretary of State

Entity Name: LOUISIANA CENTER CONDOMINIUM ASSOCIATION, INC.

| Current P   | rincipal Place of Busine  | ess:  | New Principal Place                         | e of Business:                                |
|---|---|---|---|---|
| 1150 LOUI<br>SUITE 1  | SIANA AVENUE  |   |   |   |
|   | PARK, FL 32789 US   |   |   |   |
| Current M   | lailing Address:  |   | New Mailing Addres                          | ss:   |
|   | SIANA AVE   |   |   |   |
| STE 1<br>WINTER F   | PARK, FL 32789 US   |   |   |   |
| FEI Number  | : 59-2328608 FEI Numb   | er Applied For ( )                            | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )             |
| Name and  | Address of Current Re   | gistered Agent:                               | Name and Address                            | of New Registered Agent:                      |
|   | NELL, KIRK N.<br>IG VALLEY LANE   |   |   |   |
| ALTAMON<br>The above  |   | US<br>s statement for the p                   | ourpose of changing its registere           | ed office or registered agent, or both,       |
| ALTAMON The above in the State  | named entity submits this<br>e of Florida.  |   | ourpose of changing its registere           | ed office or registered agent, or both,       |
| ALTAMON The above n the State   | named entity submits this<br>e of Florida.<br>RE:   |   |   | ed office or registered agent, or both,  Date |
| ALTAMON The above in the State SIGNATUI                                 | named entity submits this<br>e of Florida.<br>RE:   | s statement for the p                         | ent   |   |
| ALTAMON The above in the State SIGNATUI  OFFICER: Title: Name: Address: | named entity submits this<br>e of Florida.<br>RE:<br>Electronic Signatur  | s statement for the present of Registered Age | ent   | Date  |
| ALTAMON The above in the State SIGNATUI                                 | e named entity submits this e of Florida.  RE:  Electronic Signatur  S AND DIRECTORS:  PD () Delete  MARLONE, MICHAEL  1150 LOUISIANA AVE. SUIT | s statement for the present of Registered Age | ent  ADDITIONS/CHANG  Title: Name: Address: | Date<br>SES TO OFFICERS AND DIRECTOR          |

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: KIRK N. KIRKCONNELL TD 01/29/2009