

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 768999

1. Entity Name

L.O.V.O. CONDOMINIUM ASSOCIATION, INC.

FILED

May 01, 2000 8:00 am
Secretary of State

05-01-2000 90392 023 ****61.25

Principal Place of Business

Mailing Address

U.S. 192 WEST
7770 W IRLO BRONSON MEM HWY
KISSIMMEE FL 34747
US

U.S. 192 WEST
7770 W IRLO BRONSON MEM HWY
KISSIMMEE FL 34747-1741
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-2942714

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POHL & SHORT, P.A.
280 W. CANTON AVENUE
SUITE 410
WINTER PARK FL 32789

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
D	STEWART STEVE	47 ARIAN AVE	BRONX NY 10463	S *	Stewart, Stephen	47 Arian Ave.	Bronx, N.Y. 10463
D	DOLLOFF, HAROLD	104 CLARK ST	PORTLAND ME 04102	T	Upthagrove, Fred	3 Sunshine Blvd	Ormond Beach, FL 32174
D	BLAISSE, LARRY	1329 COLWEL LANE	CONSHOHOCKEN PA 19428	D	Shemancik, Tom	1311 Hamlin Dr	Clearwater, FL 33764
D	GARFINKLE, DAVID	1111 LINCOLN RD 800	MIAMI BCH FL	VP *	Dolloff, Harold	104 Clark St.	Portland, ME 04102
D	ASPINALL, JIMMY	7770 W. IRLO BRONSON HWY	KISSIMMEE FL 34747	P *	Blaisse, Larry	1329 Colwel Lane	Conshohocken, PA 19428

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Fred Upthagrove*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/17/00

Date

904-677-0573

Daytime Phone #

CR2E037 (9/99)