

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768999

FILED
Apr 14, 2010
Secretary of State

Entity Name: L.O.V.O. CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

DAILY MANAGEMENT, INC
P.O. BOX 730119
ORMOND BEACH, FL 321730119 US

New Mailing Address:

FEI Number: 59-2942714 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

POHL & SHORT, P.A.
280 W. CANTON AVENUE
SUITE 410
WINTER PARK, FL 32789 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: SD
Name: STEWART, STEVE
Address: 47 ARIAN AVE
City-St-Zip: BRONX, NY 10463

Title: TD
Name: MARTEL, RICHARD
Address: 15313 HAYWORTH DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: PD
Name: BLAISSE, LARRY
Address: 1329 COLWELL LANE
City-St-Zip: CONSHOHOCKEN, PA 19428

Title: VD
Name: SHEMANCIK, TOM
Address: 1311 HAMLIN DR
City-St-Zip: CLEARWATER, FL 33764

Title: ASD
Name: NETTLES, KENNETH
Address: 106 SPRINGHOUSE DR
City-St-Zip: SAVANNAH, GA 31419

I hereby 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 all other like empowered.

SIGNATURE: LARRY BLAISSE

PD

04/14/2010

Electronic Signature of Signing Officer or Director

_____ Date