2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003136

City-St-Zip:

PARKLAND, FL 33076

Entity Name: LOTTERY WINNERS ASSOCIATION, INC.

FILED May 07, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
3301 QUA SUITE 201	NTUM BLVD		3301 QUAI SUITE 201	NTUM BLVD		
BOYNTON BEACH, FL 334268669				BOYNTON BEACH, FL 33426		
Current Mailing Address:			New Maili	New Mailing Address:		
1128 ROYAL PALM BEACH BLVD., SUITE 475 ROYAL PALM BEACH, FL 33411			3301 QUANTUM BLVD. SUITE 201 BOYNTON BEACH, FL 33426			
	20-0734521 FEI Number ce with s. 607.193(2)(b), F.S., th		ımber Not Appl the prior notic		Certificate of Status Desired ()	
Name and	Address of Current Regi	stered Agent:	Name and	Address of N	ew Registered Agent:	
KAUFMAN, AMY 3301 QUANTUM BLVD SUITE 201 BOYNTON BEACH, FL 334268669 US			KAUFMAN, AMY 3301 QUANTUM BLVD SUITE 201 BOYNTON BEACH, FL 33426 US			
	named entity submits this set of Florida.	statement for the purpose	of changing i	ts registered of	fice or registered agent, or both,	
SIGNATUR	RE:			05/07/2007		
	Electronic Signature	of Registered Agent			Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	CP () Delete ANDERSON, DONNA 1385 SJOREN LANE HERMISTON, OR 97838		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete BERTUCCI, ANTHONY 5501 COASTAL DRIVE BOCA RATON, FL 33487		Title: Name: Address: City-St-Zip:	P (X) ANDERSON, DO 1385 SJOREN L HERMISTON, O	ANE	
Title: Name: Address: City-St-Zip:	D () Delete MITCHELL, ANTHONY 5030 CHAMPION BLVD., G6 #. BOCA RATON, FL 33496	284	Title: Name: Address: City-St-Zip:	VST (X) KAUFMAN, AMY 6418 NW 99 AV PARKLAND, FL	ENUE	
Title: Name: Address: City-St-Zip:	P (X) Delete ANDERSON, DONNA 1385 SJOREN LANE HERMISTON, OR 97838		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address:	VST (X) Delete KAUFMAN, AMY 6418 NW 99 AVENUE		Title: Name: Address:	()	Change () Addition	

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.

City-St-Zip:

SIGNATURE: AMY L KAUFMAN VST 05/07/2007