

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002931

FILED
Mar 16, 2009
Secretary of State

Entity Name: LIVINGSTON COMMONS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

215 E. LIVINGSTON STREET
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

215 E. LIVINGSTON STREET
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 73-1635278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLANE, J. BROCK
215 E. LIVINGSTON STREET
ORLANDO, FL 32801 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: DT () Delete
Name: MCCLANE, J. BROCK
Address: 215 E. LIVINGSTON STREET
City-St-Zip: ORLANDO, FL 32801

Title: DS () Delete
Name: DIMASI, JOHN
Address: 215 E. LIVINGSTON STREET
City-St-Zip: ORLANDO, FL 32801

Title: D () Delete
Name: SHAPIRO, PETER
Address: 215 E. LIVINGSTON STREET
City-St-Zip: ORLANDO, FL 32801

Title: DP () Delete
Name: PERLA, HENRY
Address: 215 E. LIVINGSTON STREET
City-St-Zip: ORLANDO, FL 32801

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:

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: HENRY L. PERLA

PRES

03/16/2009

Electronic Signature of Signing Officer or Director

Date