

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00933

FILED
May 01, 2010
Secretary of State

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

Current Principal Place of Business:

C/O J.M. ANDERSON MANAGEMENT, LLC
284 EAST LONG CREEK COVE
LONGWOOD, FL 32750

New Principal Place of Business:

C/O J.M. ANDERSON MANAGEMENT, LLC
284 EAST LONG CREEK COVE
LONGWOOD, FL 32750 US

Current Mailing Address:

ANDERSON 3242 WESTCHESTER SQ BLVD
SUITE 101
ORLANDO, FL 32835 US

New Mailing Address:

C/O J.M. ANDERSON MANAGEMENT, LLC
284 EAST LONG CREEK COVE
LONGWOOD, FL 32750 US

FEI Number: 59-1160435 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

J.M.ANDERSON MANAGEMENT, L.L.C.
3242 WESTCHESTER SQ BLVD
SUITE 101
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

J.M.ANDERSON MANAGEMENT, L.L.C.
284 EAST LONG CREEK COVE
LONGWOOD, FL 32750 US

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

05/01/2010

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: RODRIGUEZ, EDUARDO
Address: 608 WHITE RIVER DRIVE
City-St-Zip: ORLANDO, FL 32828

Title: VPD
Name: ARIAIL, SCOTT
Address: 315 E. VANDERBILT
City-St-Zip: ORLANDO, FL 32804

Title: TD
Name: FRANKLIN, JENNIFER
Address: 3523 BACKSPIN LANE
City-St-Zip: ORLANDO, FL 32804

Title: SD
Name: KIRTON, BRIDGER
Address: 608 WHITE RIVER DRIVE
City-St-Zip: ORLANDO, FL 32828

Title: D
Name: RIVERA, RAUL
Address: 5885 DAHLIA DRIVE #101
City-St-Zip: ORLANDO, FL 32807

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: JAMES MICHAEL ANDERSON

RA

05/01/2010

Electronic Signature of Signing Officer or Director

Date