2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 06, 2007 8:00 am
Secretary of State
08-06-2007 90032 026 ****61.25

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1. Entity Name
CHINA GLASS WAREHOUSE LOFTS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
11 N. SUMMERLIN AVE. ORLANDO, FL 32801	11 N. SUMMERLIN AVE. ORLANDO, FL 32801

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01102007 No Chg-NP CR2E037 (4/06)

4. FEI Number
20-2562701
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DON ASHER & ASSOCIATES, INC.
52 E. SOUTH ST.
ORLANDO, FL 32801

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RAMPY, PHILIP C
STREET ADDRESS	11 N. SUMMERLIN AVE.
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	S
NAME	CONZONE, BRYAN
STREET ADDRESS	62 W. COLONIAL DR. #209
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	T
NAME	DEEB, JOHN
STREET ADDRESS	62 W. COLONIAL DR. #210
CITY-ST-ZIP	ORLANDO, FL 32801
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ 7/31/07 407-425-5069
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #