

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

08-16-2007 90014 002 ***61.25
N02000005280

FILED

07 AUG 20 PM 2:05

CLERK OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000005280					
1. Entity Name CHINA GLASS WAREHOUSE LOFTS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 11 N. SUMMERLIN AVE. ORLANDO, FL 32801			Mailing Address 11 N. SUMMERLIN AVE. ORLANDO, FL 32801		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 20-2562701			Applied For Not Applicable		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			07242007 Chg-NP CR2E037 (12/06)		
6. Name and Address of Current Registered Agent DON ASHER & ASSOCIATES, INC. 52 E. SOUTH ST. ORLANDO, FL 32801			7. Name and Address of New Registered Agent Name: <u>Steven D. Asher</u> Street Address (P.O. Box Number is Not Acceptable): <u>1801 Cook Avenue</u> City: <u>Orlando</u> FL Zip Code: <u>32806</u>		
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RAMPY, PHILIP C 11 N. SUMMERLIN AVE. ORLANDO, FL 32801 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P John Deeb 62 W. Colonial #210 Orlando, FL 32801 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CONZONE, BRYAN 62 W. COLONIAL DR. #209 ORLANDO, FL 32801 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bryan Conzone 62 W. Colonial #209 Orlando, FL 32801 ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEEB, JOHN 62 W. COLONIAL DR. #210 ORLANDO, FL 32801 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Melena Grimes 62 W. Colonial #302 Orlando, FL 32801 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>7/8/21</u> ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Scott Sprague 11 N. Summerlin Ave. Orlando, FL 32801 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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: _____ DATE: <u>8/6/07</u> DAYTIME PHONE: _____					