

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N03000004909

1. Entity Name
LOCKS LANDING COMMUNITY DOCKING FACILITY
CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
8884 SW FISHERMAN'S WHARF DRIVE
STUART, FL 34997

Mailing Address
C/O J & J PERSONALIZED MANAGEMENT
POST OFFICE BOX 1863
PALM CITY, FL 34991

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

04022008 Chg-NP CR2E037 (12/06)

4. FEI Number
02-0695274

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIEBERT, STEVEN H
8884 SW FISHERMANS WHARF DR
STUART, FL 34997

Name *Jerry Zalben*

Street Address (P.O. Box Number is Not Acceptable)

125 B Lakes End Drive

City *FT Pierce*

FL Zip Code *34982*

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 *Jerry Zalben*

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, 2008**

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 P Delete
NAME SIEBERT, STEVE
STREET ADDRESS 8884 SW FISHERMANS WHARF DR
CITY-ST-ZIP STUART, FL 34997

TITLE D Change Addition
NAME Gene Colson
STREET ADDRESS 8867 SW Fishermans Wharf
CITY-ST-ZIP Stuart, FL 34997

TITLE VP Delete
NAME HAMMOND, MARK
STREET ADDRESS 8887 SW FISHERMANS WHARF DR
CITY-ST-ZIP STUART, FL 34997

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME EUGENE, REIFF
STREET ADDRESS 8824 SW FISHERMANS WHARF DR
CITY-ST-ZIP STUART, FL 34997

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D Delete
NAME PETERS, BRAD
STREET ADDRESS 8082 SW YACHTSMANS DR
CITY-ST-ZIP STUART, FL 34997

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST Delete
NAME LOCATIS, TERRY
STREET ADDRESS 8808 SW FISHERMANS WHARF DR
CITY-ST-ZIP STUART, FL 34997

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Jerry Zalben*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

40086183

