

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 04, 2007
Secretary of State

DOCUMENT# N06000007789

Entity Name: THE LOFTS AT COLLINS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1666 KENNEDY CAUSEWAY
NORTH BAY VILLAGE, FL 33141**New Principal Place of Business:**1150B EAST HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009 US**Current Mailing Address:**1666 KENNEDY CAUSEWAY
NORTH BAY VILLAGE, FL 33141**New Mailing Address:**1150B EAST HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009 US**FEI Number:** 56-2637375**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DE CESPEDES, CARLOS
1200 BRICKELL AVE SUITE 1440
MIAMI, FL 33031 US**Name and Address of New Registered Agent:**LECHTER, ROBERT S
1150B EAST HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009 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: ROBERT S. LECHTER

10/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GAVIRIA, JUAN C
Address: 1666 KENNEDY CAUSEWAY
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: D () Delete
Name: MATERA, ALFREDO
Address: 1110 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: LECHTER, ROBERT
Address: 1150 EAST HALLANDALE BEACH BLVD SUITE B
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LECHTER, ROBERT S
Address: 1150B EAST HALLANDALE BEACH BLVD.
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: DVP (X) Change () Addition
Name: MATERA, ALFREDO
Address: 1110 BRICKELL AVE
City-St-Zip: MIAMI, FL 33131 US

Title: DS (X) Change () Addition
Name: MURGAS, PAULINA
Address: 1150B EAST HALLANDALE BEACH BLVD.
City-St-Zip: HALLANDALE BEACH, FL 33009 US

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: ROBERT S. LECHTER

DP

10/04/2007

Electronic Signature of Signing Officer or Director

Date