

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 11, 2009
Secretary of State**

DOCUMENT# N07000004233

Entity Name: LOFTWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10109 SW 72ND STREET
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

8515 SE 72ND AVE
OCALA, FL 34472

New Mailing Address:

FEI Number: 26-0801776 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, HAROLD L ESQ
ONE BISCAYNE TOWER SUITE 2400
2 SOUTH BISCAYNE BLVD
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: YONGE, RICHARD
Address: 10109 SW 72ND STREET
City-St-Zip: MIAMI, FL 33173

Title: VST () Delete
Name: YONGE, RICHARD
Address: 10109 SW 72ND STREET
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: VERGEL, DELKY
Address: 10109 SW 72ND STREET
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: RANDELL, DAVID
Address: 10109 SW 72ND STREET
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD YONGE

PD

02/11/2009

Electronic Signature of Signing Officer or Director

_____ Date