

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25037

FILED
Feb 06, 2009
Secretary of State

Entity Name: LOVELAND COURTYARDS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3300 LOVELAND BLVD.
PORT CHARLOTTE, FL 339808702

New Principal Place of Business:

Current Mailing Address:

3300 LOVELAND BLVD
PORT CHARLOTTE, FL 33980 US

New Mailing Address:

FEI Number: 65-0208824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JERROM, SHEILA
3300 LOVELAND BLVD
#1501
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

JERROM, SHEILA P
3300 LOVELAND BLVD
#1501
PORT CHARLOTTE, FL 33980 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: SHEILA JERROM

02/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAVAGE, DAVID
Address: 3300 LOVELAND BLVD #2103
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: VD () Delete
Name: KELLY, JOHANNA
Address: 3300 LOVELAND BLVD #1102
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: TD () Delete
Name: JERROM, SHEILA
Address: 3300 LOVELAND BLVD #1501
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: SD () Delete
Name: MOREAU, DONALD
Address: 3300 LOVELAND BLVD #3004
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D () Delete
Name: CLAYTON, BEVERLY
Address: 3300 LOVELAND BLVD #1801
City-St-Zip: PORT CHARLOTTE, FL 33980

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: SD (X) Change () Addition
Name: BOUDREAU, GERALD
Address: 3300 LOVELAND BLVD #1503
City-St-Zip: PORT CHARLOTTE, FL 33980

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: SHEILA JERROM

TD

02/06/2009

Electronic Signature of Signing Officer or Director

Date