

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 29, 2007 8:00 am
Secretary of State

05-29-2007 90040 043 ****61.25

DOCUMENT # N43331

1. Entity Name

THE LOOP HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

2233 11TH AVENUE WEST
BRADENTON, FL 34205 US

Mailing Address

P O BOX 916
BRADENTON, FL 34206 US

DO NOT WRITE IN THIS SPACE



04302007 No Chg-NP

CR2E037 (4/06)

4. FEI Number

65-0263068

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARCUS, DIANE S
2233 11TH AVE WEST
BRADENTON, FL 34205

**DO NOT WRITE
IN THIS SPACE**

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

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, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DS
NAME VOGLER, DEBORAH
STREET ADDRESS 1819 97TH ST NW
CITY-ST-ZIP BRADENTON, FL 34209

TITLE AT
NAME BARCUS, DIANE
STREET ADDRESS 2233 11TH AVE W
CITY-ST-ZIP BRADENTON, FL 34205

TITLE D
NAME FLECK, ELIZABETH
STREET ADDRESS 9706 18TH AVE DR NW
CITY-ST-ZIP BRADENTON, FL 34209

TITLE DP
NAME CALLAHAN, CARL
STREET ADDRESS 9605 18TH AVENUE CIRCLE NW
CITY-ST-ZIP BRADENTON, FL 34209

TITLE DT
NAME BRAUNER, STEVE
STREET ADDRESS 9644 18TH AVE CIR NW
CITY-ST-ZIP BRADENTON, FL 34209

TITLE DVP
NAME EBLING, JAMIE
STREET ADDRESS 9657 18TH AVE DR NW
CITY-ST-ZIP BRADENTON, FL 34209

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/29/07 941-746-4998